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Health, Wellbeing, and Lifestyles

Introduction: This academic poster will take a deeper look into the concepts of health, wellbeing, lifestyles, and their significance within the early years. It is good to consider these concepts as they each have an influence over many aspects within early years children. This academic poster will discuss some theory, that of Maslow's hierarchy of needs, as well as Bronfenbrenner's ecological system, and what role they play among practitioners and children's health, wellbeing, and lifestyles. This academic poster aims to find the connection between health, wellbeing, and lifestyles. Alongside this, the poster will link each concept back to early years practitioners and their practice.

Health: Although health may be a complex concept to define, The World Health Organization (WHO) (2024) define health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." The WHO also suggest that governments have the obligation for the health of those around them, and by the provision of satisfactory health and social measures will this be fulfilled. A more in-depth holistic definition of health may be defined as an approach to wellness that together states the emotional, spiritual, physical, social, and mental aspects of health, according to St Catherine University (2022). Health should be considered as more than just when an individual may fall ill or injure themselves. As early years practitioners, it is their role to ensure that they are helping children to remain healthy in all aspects.

Health is important as it is our most precious asset, according to Louise Marshall (2024). They also state that having 'good health' will allow individuals to experience fulfilling, happy lives as well as giving them the opportunity to achieve their potential. Louise Marshall (2024) suggests that multiple aspects of our lives have an impact on our health, as well as the duration we live for. These aspects consist of homes, jobs, access to education, as well as whether or not an individual experiences discrimination or poverty. This is to say that if a child is living in a more deprived area, they are less able to go out and achieve a healthy lifestyle like their peers may be able to. A child may be living in a block of damp flats which can affect their physical and mental health, and they may not be able to go out and exercise. This is why it is vital to discuss health to deeper understand this.

Jamie Waterall (2018) suggests that it is important to discuss health as improved conversations with health professionals can have a positive impact on individuals mental and physical wellbeing, which will help them to avoid illness, as well as take control of their health. Early years practitioners are able to demonstrate this by having conversations with the children they are working with, which will enable them to identify any health issues that may occur.

Sir Michael Marmot has been Professor of Epidemiology at University College London since 1985 and has led research groups on health inequalities for nearly 50 years, according to The Health Foundation (2025). In 2010 came the Michael Marmot review. Six domains were recommended in this review. Some of these included, ensuring a healthy standard of living for all, as well as providing every child with the best start in life, as stated by Marmot et al. (2020). The report was followed up in 2020, and it was found that unfortunately, health inequalities in England has worsened. This report has found to have been very influential in the world of health.

Wellbeing: Wellbeing has a clear link to health. The Oxford English Dictionary defines wellbeing as "the state of being comfortable, healthy, or happy" (Mental Health Foundation 2015). Although it is vital to see that there is more to wellbeing than just feeling happy. Children's wellbeing needs being met is vital to their development. Ensuring that practitioners are listening to children's ideas and views enables them to understand what ultimately makes children happy. WHO (2025) suggest that "wellbeing encompasses quality of life and the ability of people and societies to contribute to the world with a sense of meaning and purpose." Statham and Chase (2010) with their brief overview of childhood wellbeing suggest that "wellbeing is generally understood as the quality of people's lives." They suggest that positive family relationships are closely associated with childhood wellbeing.

Wellbeing is important because all children have the right to have their views respected, as well as having their best interests to be kept as a top priority, according to The UN Convention on the Rights of the Child (UNCRC) (2019). NSPCC Learning (2021) suggest that a key factor of keeping children safe is to promote their wellbeing. They also suggest that mental health can take on a vital part in a child's wellbeing as a whole. This can be affected by different factors. These factors can involve stress, abuse and neglect, environment, and family circumstances. As early years practitioners, it is their responsibility to promote children's wellbeing. They are also responsible for knowing what steps need to be taken to keep children protected and to raise any concerns regarding their welfare. NSPCC Learning (2021) say that communicating with children about their mental health can help to promote their wellbeing. Each child is different, so some may require more wellbeing support than others.

There are theories that are able to help early years practitioners support children's wellbeing. Maslow's hierarchy of needs is an example of this. In 1943, Abraham Maslow shared his theory about the hierarchy of needs. This theory shows a diagram of a pyramid, where each individual begins at the bottom, working their way to the top, layer by layer. Each individual begins with their basic needs being met, then their psychological needs, thus ending with their self-fulfilment needs being met. If a child's needs have not been met on a certain layer, they are not able to move up to the next layer, and not getting those needs met either. Through early years practitioners supporting children's wellbeing, they are able to get these needs met, therefore reaching the top of the pyramid. Although this is not the case for every child as there are factors that cannot be easily changed, such as a child's home environment and their family around them, or lack of.



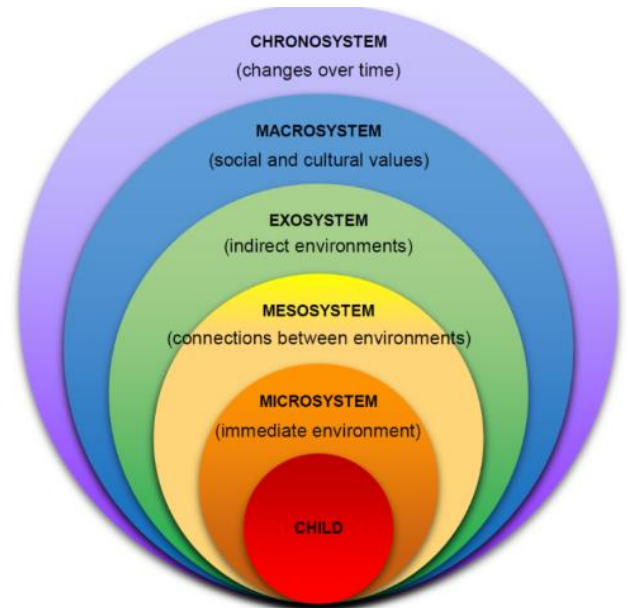
Maslow's hierarchy of needs

(Source: ThoughtCo., 2024)

Lifestyles: According to Cambridge Dictionary (2025), lifestyles are someone's way of living, being the things that a person usually does. Lifestyle factors may include diet and nutrition, home environment, community, income, etc. Barnardo's (2024) suggest that a good balance of mental and physical exercise, food, as well as good hygiene are what consist of a healthy lifestyle. Ensuring that children are eating healthy will lead to a positive lifestyle. Fortunately, there are strategies in place that promote healthy eating to children. The Welsh Government (2014) strategy Healthy eating in maintained schools gives children the opportunity to explore healthier options of food and allows them to feel involved in choosing what they eat. This strategy introduces the school milk scheme, which enables children in the early years to have a drink of milk every school day. This leads to them receiving nutrients that will give them healthier bones for example.

For some children it is not always possible to maintain a healthy lifestyle. Whilst they are able to participate in school activities that enable them to have a somewhat healthy lifestyle, their home life and environment can have an impact on the rest of their health and wellbeing. Poverty can be a main factor that affects children's lifestyles. The Welsh Government (2024) Child poverty strategy for Wales works with families to help reduce child poverty in Wales which will then lead onto them achieving a better lifestyle. The strategy consists of five objectives, one of which aims to help children, and their families reach their full capability by creating a passageway out of poverty altogether. As early years practitioners, it is significant that they provide each child with the support they require in order to thrive and develop. Although their home lifestyle may have a negative impact on their health and wellbeing, early years practitioners providing these opportunities in schools and nurseries may help them in the long run. It should also be noted that lifestyles direct and form a child's wellbeing.

In 1979, theorist Urie Bronfenbrenner developed Bronfenbrenner's ecological system. He suggested that a child is influenced by five ecological forces. If these forces were not strong, this would negatively impact the child. Zaatari and Maalouf (2022) use Bronfenbrenner's ecological system to explain how children feel a sense of belonging whilst they are in school. They quote that dependent on how welcomed and acknowledged the pupils feel, they will experience a sense of belonging. This will have a positive impact on a child's overall lifestyle, despite what their home lifestyle may be. Early years practitioners must ensure that they make every child feel as if they belong so that they are experiencing healthy wellbeing, as well as maintaining a healthy lifestyle in school. In addition to this, perhaps some parents are not aware of how to lead a healthy lifestyle. Children are then able to demonstrate to their parents how they are able to lead a healthy lifestyle at home.



(Source: Rotel Project, 2023)

Application to early years practice:

Early years practitioners have a big impact on children's health and wellbeing. In order to ensure that each child's needs are being met, multiagency working is required here. Payler and Georgeson (2013) suggest that multiagency working includes practitioners from divergent roles functioning in a unified way on a communal task, instead of being parallel to each other. Gasper (2009) states that by engaging in multiagency working, families are then provided with the opportunities to generally meet the needs so that entire families may be addressed in an undivided way. Alongside this, multiagency working is also about qualified agencies that together intend to improve their methods of planning, organising, as well as pondering on their work. This allows them to incorporate and merge with their own skills and perspectives.

As early years practitioners, they each have a vital role that involves identifying any issues with children, and these may require the assistance of other agencies (Hall 2005). Hall (2005) stated that early years practitioners had identified that children experiencing language and speech difficulties equalled to two thirds of children. By identifying these difficulties, practitioners are able to provide children with the appropriate support that is required. This then leads on to children being able to achieve their full potential, thus having a high level of good mental health and wellbeing.

According to The Welsh Government (2008), there are seven core aims in Wales. One of these aims are, "every child and young person has access to a comprehensive range of education, training and learning opportunities." This links with the UNCRC, allowing children to express their rights. Early years practitioners are able to ensure that children are receiving the correct education by providing them with carefully planned lessons that are suited towards their appropriate age range, as well as following guidance from the Welsh curriculum. Another core aim is that "all children and young people are listened to, treated with respect and have their race and cultural identity recognised." This also links with the UNCRC. Early years practitioners are able to listen to each child and keep their best interests so that their health and wellbeing is always being prioritised.

Conclusion: In consideration with the information provided, it is visible that there is a strong connection between health, wellbeing, and lifestyles. Each concept has an influence over the other, evidence has shown. By using this poster, practitioners are able to develop their understanding of health, wellbeing, and lifestyles, and are able to use their newfound knowledge in practice. Through theories that have been analysed, it is clear that they are able to demonstrate and promote positive health, wellbeing, and lifestyles. These theories will continue to be used within early years settings among practitioners, enabling children to receive the best care possible.

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Health and Wellbeing Presentation

In this presentation, I will be discussing poverty and how it affects obesity in children. Poverty is a very wide concept, so I will discuss what poverty is, what effects it has on children and young people, what may cause it, as well as other factors. I will also be discussing how poverty links with obesity and how early years practitioners are able to help children in this aspect.

To start off with, D'Arcy and Goulden (2014) define poverty as "when a person's resources are not sufficient to meet their minimum needs." Poverty can be caused by a variety of factors. One of these being the covid-19 pandemic. The Joseph Rowntree Foundation (2022) found that most disposable incomes fell by 1.7% in 2020 to 2021, as compared with the previous year. Many people were made unemployed during the pandemic, so they were unable to afford the things they would usually buy. This resulted in families being unable to afford healthy food, instead being forced to buy cheap alternatives, such as frozen processed foods, instant noodles, etcetera. The covid-19 pandemic also forced many families to remain indoors. This meant that people were unable to go outside and exercise. Fortunately, early years practitioners hosted online sessions for children where they were able to participate in activities such as yoga, warmups, and stretching. Although for some children, due to their home environment and a lack of access to these resources, they are unable to participate in these sessions. This resulted in them being unable to exercise during the pandemic. As well as this, if they lived in an unsafe area, they could not go outside. As a result of the restrictions, they could not go to exercise in places such as soft play centres and local parks. This meant that as well as poverty levels rising, obesity levels were rising at the same time.

Poverty can affect health and wellbeing in young children. According to the Welsh Government (2024), children that are likely to experience health inequalities and have poorer health are those who live in poverty. Poorer health can lead to childhood obesity. The World Health Organization (WHO) (2024) suggest that "obesity is a chronic complex disease defined by excessive fat deposits that can impair health." In 2022, WHO (2024) estimated that under the age of five, 37 million children were overweight. One of the causes of obesity, as stated by WHO (2024) is a consequence of an imbalanced diet and a lack of exercise. This is linked to childhood poverty as some children may live in environments that are not safe for them to go outside and play in. They may be also affected by other things, such as the quality of their homes. For example, some children may be living in a tower block of flats where there may be mould and damp growing on the walls, thus causing illness as well as long term breathing difficulties. This is supported by NHS Inform (2025). Early years practitioners are able to promote health and wellbeing in their settings by providing relaxed sessions to the children that include things such as stretching, dancing, and walking.

There are different levels of poverty. According to the Richmond Vale Academy, there are six types of poverty. These are generational poverty, situational poverty, absolute poverty, urban poverty, relative poverty, and rural poverty. Poverty can be caused by a few different factors. The Richmond Vale Academy suggest that this could be due to a lack of education, discrimination, lack of healthy food, and inadequate housing. Ridge (2002) suggests other factors, such as children who live in a single parent household, having a member of the family at home who may have long term sickness so would require additional care, living in a workless household, or living in a big family. These factors result in families having little to no money, resulting in them not being able to afford the best quality food for their children. In some cases, families are not able to purchase enough food, which puts children on the opposite end of the spectrum, meaning they are actually underweight. Due to the benefits system, families are able to buy food for their children, even if it is not very healthy. Often, they find themselves purchasing cheap processed freezer foods, or perhaps tinned foods and instant meals, as has been previously stated. Fruit and vegetables are expensive compared to this and will not last as long as the cheaper alternatives. As a result, of this, children are not receiving the correct balanced diet they require.

Garrington (2015) found that poverty-stricken children at the age of 5 were two times more likely to be obese as compared to their more advantaged peers. They also suggest that “early intervention is the most effective way to break this cycle.” Early years practitioners are able to help all children in their care through methods such as physical education lessons, government schemes, and providing healthy food within their settings. Goisis *et al.* (2015) suggest that “there is also evidence that overweight and obese children face higher risks of negative economic and social outcomes both in childhood and adulthood.” Early years practitioners play an important role in preventing this. One of these methods they use is the daily mile. Welsh Government (2017) explain that the daily mile is a fitness scheme in schools that encourages children run, walk, or jog for one mile each day. This is designed to be enjoyable, as well as inclusive, thus making it accessible to meet the needs of each school and the children within. The daily mile promotes fitness, health and wellbeing as it is made to be enjoyable for the children. As well as this, it provides them with exercise every day, which will help with muscle strength and weight loss.

Another example of a government scheme to tackle obesity is, healthy eating in maintained schools. Welsh Government (2014) state that there have been ongoing worries including the amount of young people who are obese or overweight, thus in relation to lowering health inequalities, as well as the impact this may have on wellbeing and health. A major contributing factor to this is poor diet. It is suggested that the drink and foods given out to young people in schools create a positive contribution towards encouraging them to establish good eating habits and also allowing them to

develop good eating habits. This is beneficial to children in poverty as they are provided with opportunities to eat healthy, as well as gaining healthier eating habits. Although some families may not be able to afford to get children healthier options, children are being educated on healthier food, which can then lead to them educating their families who may not be so educated on the matter.

The eat-well plate is a clear guide that shows children different types of food and proportions they should be eating. Welsh Government (2024) suggest that between the ages of two and five is when children should begin to eat the same foods as the rest of their family. The eat-well plate ideally is placed on the wall in schools as it is easy for young children to understand, and it allows them to see images of what they should be consuming, rather than just being told. Another way the government are attempting to prevent childhood obesity is providing all primary school children with free school meals. Welsh Government (2024) state that this scheme has been brought into place due to a result of the rising cost of living pressures. This is being done as they aim to make sure that no child goes hungry in school, and to tackle child poverty. This scheme has its benefits, including the fact that it will promote healthy eating throughout the school. Another benefit is that it will improve children's social skills at dinnertimes as they are asking the lunch staff what they would like to eat. On top of this, the variety of food options provided to children are increased as more pupils are claiming free schools meals, resulting in more healthier and active children. Especially as typically after children have had their lunch, they are sent outside to play if the weather is alright. Children often engage in activities such as running, jumping, skipping, and walking.

The Welsh Government (2024) designed a child poverty strategy for Wales. Within this scheme are five objectives. One of these are to maximise the incomes of families by reducing costs. It is also suggested that individuals may face difficulties as perhaps they only have access to small local food shops where prices are increased, due to the fact that transport to the cheaper alternatives is not always possible. The Welsh Government (2024) also suggest that health inequalities are related to an absence of access to healthy cheaper food. Families living in deprived areas may be located further away from larger supermarkets that sell good quality food for a reasonable price. They are forced to approach corner shops where they have to buy less in order to save more. Often, they find themselves purchasing from the reduced sections. Fortunately for some poorer families, there are a few supermarkets that have schemes such as membership cards that allow them to purchase food at a reduced price. Early years practitioners are able to support these families by things such a food bank scheme within their setting, where it is advertised for everyone to bring something in to donate optionally, thus helping those who need it. It is done discreetly to avoid embarrassment amongst the children so that no child is treated unfairly due to their circumstances.

The Welsh Government (2022) created their “Healthy weight: healthy Wales” scheme in order to lower the amount of people who are obese in Wales. This scheme began in 2019, but due to the covid-19 pandemic, it had an impact, meaning the numbers of obese people in Wales have increased. There are four themes within this strategy. These are leadership and enabling change, healthy settings, healthy environments, and healthy people. They have been set by the scheme as they wish to provide Wales with the best possible chance of making the changes they would like to see in the future. Early years practitioners are able to use this within settings by promoting healthy eating to children, as well as providing more opportunities for exercise.

As well as this, many unhealthy foods appear to be marketed towards young children. LoDolce (2015) states that unhealthy food often appears cheaper than healthy food, is more commonly found, easier to access, as well as easier to cook and prepare. They also state that in 2015 statistically children were exposed to roughly thirteen food advertisements on the television each day. The majority of these advertisements contained products that are high in sugar, fat, and salt. Within food shops the unhealthy foods being sold are packaged with things like bright colours, cartoon characters, and bold text. This draws children in, which then results in parents buying them these unhealthy foods as they want to please their children. For children in extreme poverty, these carefully advertised unhealthy foods are seen as a treat, so parents who are unable to even afford these kinds of foods find themselves turning to purchasing the cheaper alternative, which may be even healthier. Early years practitioners are able to prevent children eating unhealthy foods by enforcing rules at mealtimes that do not allow children to bring in packed lunches full of sweets, crisps, and chocolate, instead encouraging them to bring in fruit and vegetables in their lunchboxes. For the children who are provided food within their setting, they receive the healthier options anyway. This is why schemes such as all children receiving free school meals are found to be effective.

It is important to note that although children should not be eating a ton of sugary foods, an occasional treat every once in a while, is acceptable. At the same time, getting plenty of exercise is vital to their development. It is clear that there is a link between poverty and childhood obesity, research has shown. Through government strategies, obesity and poverty levels can be reduced. Early years practitioners play a role in reducing this also, as has been stated. Poverty and obesity have a clear effect on children’s health and wellbeing, but with research and evidence discussed, practitioners are shown to have a positive effect on this.

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