

Introduction.
This poster is going to explore the concepts in health, wellbeing and lifestyles in the early years. A number of different resources will be used to gain the information and knowledge to complete this poster

Health.

The world health organization (2022) defines health as ‘a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity’. The department of health (2010) defines health as including a person’s emotional and wellbeing not just as being a physical aspect. This suggests that health is influenced by social, economic and environmental factors. These definitions also suggest that health is not simply just about physical conditions it is also linked to wellbeing. Musgrove (2017) also suggests this as he states that health and wellbeing is to attain and sustain both physical fitness and mental stability. He said that health resulted from a mixture of social, emotional, intellectual and physical factors.

According to the Marmot review (2010) people with a higher socio-economic status have better health outcomes and have longer life expectancy than those from a lower socio-economic position. This implies he lower the socio-economic status the worse their health is. Socio-economic status has been defined as a way to describe someone based on their education, income and employment status (National cancer institute, 2024). The Marmot review (2010) discusses the factors that affect one’s health to include education, income, employment and community. This states that early childhood experiences can have a lasting impact on lifelong health of individuals. One of the objectives of this policy is to invest more into the early years to ensure that all children are given the best possible start in their life. This review also looked at the inequalities in health care due to a person’s socio-economic status and looks at ways to reduce these. However, the Marmot Review: 10 Years On (2020) showed that some things declined rather than improved, these include life expectancy had a decline in the most deprived areas as well as health outcomes. Due to government cutbacks some of the more deprived areas had even more lack of health care services available to them. Early years intervention services had insufficient funding especially in the already deprived areas. The review also claimed that children living in poverty had increased and suggests that children from deprived areas are more likely to have developmental delays and more likely to suffer from chronic health conditions later in life.

The Dahlgren and Whitehead model (1991) is used to understand the social determinants of health. It looks at the various factors include including social and environmental aspects that influence a person’s health and wellbeing. This model is often pictured as a rainbow with the different layers that can make a difference. Firstly, there are the factors that cannot be changed which include the individual’s sex, age and any genetics inherited. Then there are the persons individual life choices such as diet, physical activity levels and any substance misuse choices. Then it discusses the social and community influences, including relationships with others and any wider support networks that provide support, that can influence behaviours. The next layer is the living and employment conditions; this includes the access to education and health care in the area lived in. This section also includes the conditions of housing and the employment opportunities in the local vicinity. Lastly there is the socio-economic, cultural and environmental conditions, these include broader influences cultural norms and environmental conditions. From this we can understand that many different factors can have an impact on a person’s health and wellbeing.

Wellbeing

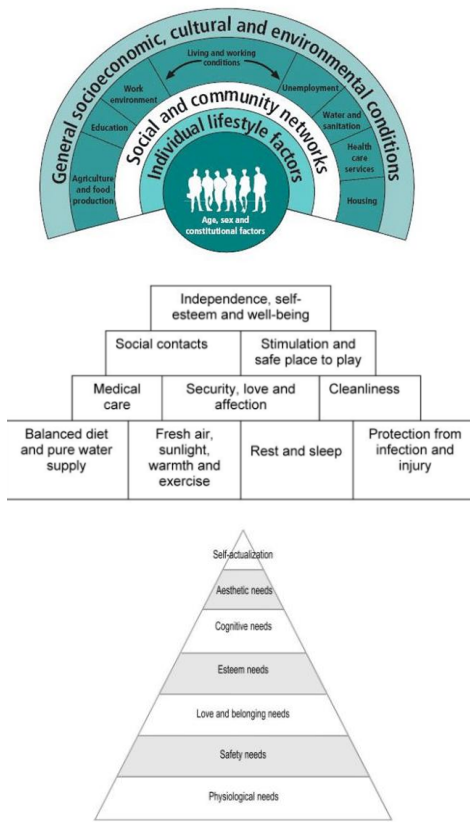
According to the NHS (Department of Health, 2014) a definition of wellbeing is about feeling good and functioning well. The Welsh government (2014) defines wellbeing as a person being ‘happy, healthy and comfortable with their life and what they do’. Wellbeing is connected to health as it can help to improve the recovery process from illnesses and improve life expectancy. It has also been thought to be related to the positive health behaviours in children (Department of Health,2014).

There are many aspects to wellbeing and many factors that can affect this. These are set out in the Social Services and Well-being (Wales) Act 2014 (Welsh Government (2014) and include physical, mental and emotional health. For example, the Act claims that a safe living environment free from neglect and abuse is important in protecting children’s wellbeing. Another factor that has been said to affect the wellbeing of a child includes appropriate housing that suits their needs. Furthermore, the Welsh government (2014) relationships with others around them can affect a child’s wellbeing, if the person has safe and strong relationships with family and friends this can have a positive impact on wellbeing. They also go on to claim that education is another factor that has a significant impact on one’s wellbeing, if a child is offered appropriate good quality education, then this has a positive impact on their wellbeing.

The Marmot review (2010) highlights that wellbeing is connected to the social detriments of health. It states that the inequalities in peoples living conditions can have an impact on their ability to lead fulfilling lives. It also states that wellbeing is about social connections, education and economic stability not just about health. This suggests that by providing high quality education and experiences can help to improve these outcomes. This review claims that early year’s experiences can shape a child’s life and impact their future as the first few years of a child’s life is crucial for brain development, emotional regulations and building social skills. This is why the marmot review calls for better access and funding for early years. The Marmot review (2010) believes that reducing health inequalities will help improve the wellbeing of the public.

The Welsh government places a strong emphasis on supporting children’s wellbeing within the early years, this is guided by policy frameworks and legislations. The main piece being The Wellbeing of Future Generations Act (2015) this aims to improve the social, economic, environmental and cultural wellbeing of Wales and especially the children’s. The act has seven has seven wellbeing goals which requires a multiagency approach to help achieve these, therefore promoting health and wellbeing in early childhood (Wainwright, Nalda et al, 2024).

Early years workers can help support children with their wellbeing by providing safe engaging environments which have a play rich approach with a strong focus on social and emotional development. By creating a safe environment that is nurturing and engaging is essential for a child’s wellbeing (Murphy,2022).



Source: (Dahlgren & Whitehead, 1991)

Economic factors are said to have the biggest impact on a child's health (Underdown, 2007, p.1). These factors include the relationships with care givers and those who they have close contact with, their housing and social environment and whether they are being brought up in poverty. The author talks about the issues that can influence a child’s health, she believes that a child’s health is determined by biological, social and emotional factors. Underdown (2007) also talks about how the lower socioeconomic factors can affect nutrition, healthcare access and development of the child.

Source: (Underdown, 2007)

The image to the left taken from Underwood’s book shows the different factors that are needed to fulfil good health for a child. Each stage must be met in order for the child to reach the top, all of these foundations help ensure a healthy life. This can be compared to Maslow’s hierarchy of needs.

Source: Underdown,2007

Maslow also believed that the basic needs of people need to be met in order to grow and move through the different processes of life. Each layer of the pyramid needs to be fulfilled in order to be able to progress to the next stage. The basic stages at the bottom of the pyramid include water, nutrition and sleep, which is identical to what Underdown (2007) claim is needed in the early stages to help ensure good health and development (Meng, Deming, 2024). This implies that ensuring that all children's needs are met can help them reach good health and development.

Lifestyle.

The World Health Organization definition of lifestyle is ‘of living based on identifiable patterns of behaviour which are determined by the interplay between an individual’s personal characteristics, social interactions, and socioeconomic and environmental living conditions’. The organisation defines a healthy lifestyle as a way of living that reduces the risk of being seriously ill or dying early.

Lifestyles deeply influence the quality of one’s life and health, the study (Bagordo, De Donno, et al, 2017) looks at how lifestyle and socioeconomic influence the health of children. The study suggests that diseases may have been avoided with different lifestyle and socioeconomic statuses. This study defines lifestyles as living conditions, health risk behaviours such as whether they have a poor diet or are exposed to smoke and socioeconomic factors such as their family structure and home environment (Bagordo, De Donno, et al, 2017).

The NHS suggests ways in which to fulfil a healthy way of living these include eating a balanced diet, exercise regularly, sleep well, cutting down on alcohol and giving up smoking. The website has further in-depth information for each of these areas. For example, preschool aged children should participate in physical activity for at least three hours a day (NHS, no date).

Lifestyle habits that are established in early childhood play a vital role in shaping a child’s health and development. Research has shown that behaviours such as eating habits, screen time and physical activity begin to take form during the early years and are usually influenced by socio-economic conditions. These behaviours can often be linked to the mother’s level of education, therefore highlighting the impact of socio-economic status on early childhood (Lioret, Campbell et al, 2020).

Musgrove (2017) believes that living a healthy lifestyle is achievable by eating a balanced diet, ensuring that the recommended amount of physical activity is undergone, that the required amount of sleep is taken. This suggests that by following all of these recommendations this will help support the health, growth and wellbeing of the children. Musgrove (2017) suggests that early year’s practitioners can help support the health and wellbeing of children by having the knowledge and understanding about specific health and wellbeing conditions. Musgrove (2017) also suggests that building good relationships with the children and their families can help identify their support needs effectively, these may include poverty and the impact it has on the family. These impacts may include poor housing and poor nutrition both which can have an adverse effect on the health and wellbeing of the child. Musgrove (2017) believes that practitioners should understand the importance that social and cultural experiences may have on the health and wellbeing of the child. The practitioner can help educate and promote good health to children, they can explain about good dental hygiene and the reasons why, they can also promote healthy eating by providing nutritional and healthy meals and snacks (Musgrove, 2017).

Conclusion.

The evidence presented in this poster highlights the links between health, wellbeing and lifestyle, highlighting the mutual influences. It is crucial for children to engage in healthy lifestyles with an emphasis on the importance of having nurturing and supportive relationships with those around them. Practitioners provide an important role in promoting positive wellbeing amongst children.



Source: Kiddies plate (2024)

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