

Cover Sheet

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Page 2 – PosterPage 6 – Reference list for poster

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AI – I acknowledge the use of AI to find appropriate sources, prompts used:

Academic articles about the importance of IBCLCs

Academic articles relating to ELSA support

Academic articles on health in the early years

Academic articles on lifestyles relating to early years

Academic articles on wellbeing in the early years

Introduction

Health and wellbeing in the early years are fundamental to children's development and future life outcomes. The early years, defined as birth to five, represent a critical period of rapid physical, emotional, social and cognitive growth, during which experiences can have long-lasting effects (Department for Education, 2023). Research consistently shows that positive health and wellbeing in early childhood are associated with improved learning, behaviour and long-term physical and mental health (World Health Organization, 2018).

Health and wellbeing are closely interconnected. Health encompasses physical, mental and social dimensions, while wellbeing relates to children's emotional security, happiness and capacity to form positive relationships (WHO, 2018). Attachment theory, originally developed by Bowlby and still widely referenced in contemporary research, provides a key framework for understanding early emotional development and wellbeing (Garrett, 2022). Secure attachment relationships support emotional regulation, social competence and resilience in young children. Within early years settings, practitioners play a crucial role in promoting health and wellbeing by creating safe environments, encouraging healthy lifestyles and fostering secure relationships. The Early Years Foundation Stage (EYFS) framework emphasises health, wellbeing and personal, social and emotional development as essential foundations for children's learning and development (DfE, 2023).

This poster explores key aspects of health, wellbeing and lifestyle factors in the early years, linking theory, policy and practice to highlight the role of early years practitioners in supporting children's holistic development.

Health

Health is defined by the World Health Organization (WHO) as "a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity," highlighting that good health is holistic rather than simply the absence of illness (WHO, no date). The NHS similarly emphasises that child health includes growth, development, emotional wellbeing and illness prevention (NHS, 2023). The UNCRC recognises every child's right to the best possible health, including access to nutritious food, clean water, and health education (UNCRC, 1989).

Good nutrition supports healthy growth, cognitive development and immune function. Early experiences with food shape lifelong habits and influence health outcomes, including the risk of obesity (UNICEF, no date; The Food Foundation, 2021). Public health guidance recommends balanced diets with appropriate portions of fruits, vegetables, whole grains and lean proteins while limiting high sugar, salt and fat foods (Department for Education, no date). Adequate nutrition in early life also underpins children's engagement in learning and overall development (Roberts et al., 2022).

Monitoring growth and development is central to early years health programmes. In Wales, the Healthy Child Wales Programme provides universal contacts, including weighing and developmental reviews, to identify concerns early (Welsh Government, no date). Health visitors support families from birth to school entry, offering guidance on nutrition, milestones and early health needs (Morton, 2024).

Adequate sleep is fundamental to memory, emotional regulation and overall wellbeing (Félix and Candeias, 2025). Article 31 of the UNCRC recognises children's right to rest, leisure and play (United Nations, 1989), and Maslow's hierarchy of needs positions rest as a basic physiological requirement essential for higher-level needs such as safety, belonging and learning (Maslow, 1943).

continued

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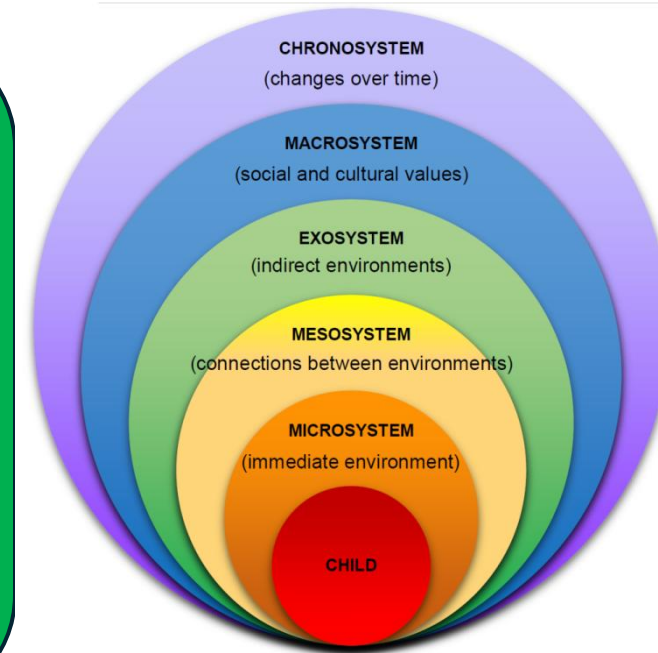
HIERARCHY OF NEEDS



(Eckstein-Koas, 2021)

Physical activity supports motor skills, social interaction, cognitive development and school readiness (Bai et al., 2021). Both structured and free active play help establish lifelong healthy habits, reducing sedentary behaviour. National guidance encourages daily physical activity across various intensities (NHS, 2025). Preventative healthcare, such as the NHS childhood immunisation programme, protects children from serious diseases. Vaccines are offered at key stages from 8 weeks through school entry, contributing to herd immunity and protecting vulnerable children (Gov.uk, no date; NHS, no date). Despite misinformation linking vaccines to autism, robust research consistently shows no association (Taylor, Swerdfeger and Eslick, 2014; MHRA, 2025). Good hygiene in early years settings reduces illness transmission. Infection control measures, including handwashing, cleaning surfaces and toys, are essential (UKHSA, 2025). In Wales, the Designed to Smile programme encourages daily supervised toothbrushing to prevent decay (Welsh Government, no date). Children should be excluded from nursery for at least 48 hours after vomiting or diarrhoea to prevent the spread of infections, particularly during early childcare exposure (UKHSA, 2025; Søegaard et al., 2022).

Poor health can significantly hinder learning in the early years, as unmet physiological needs affect concentration, attendance and cognitive engagement. This aligns with Maslow's theory of human motivation, which proposes that basic needs must be met before children can engage in higher-level learning (Maslow, 1943). The Early Years Foundation Stage (EYFS) similarly emphasises that children's physical health and emotional wellbeing are foundational to learning and development (DfE, 2023). In addition, Bronfenbrenner's ecological systems theory highlights how children's development is shaped by interactions between family, health and wider community environments, reinforcing the importance of a holistic approach to wellbeing in early childhood education (Bronfenbrenner, 1979).



(Budzyna and Buckley, 2023)

Wellbeing

Wellbeing in early childhood refers to children's subjective sense of happiness, emotional security and belonging, shaped through positive relationships, play, autonomy and meaningful engagement within their early learning environments (Hernández-Torrano *et al.*, 2025).

Emotional wellbeing in early childhood involves children recognising, expressing and managing their emotions, which supports learning, behaviour and relationships. Emotional Literacy Support Assistant (ELSA) interventions in schools help children develop emotional awareness, coping strategies and resilience. Children report valuing the supportive relationship with their ELSA and the practical strategies they are taught to manage emotions, which strengthens their overall wellbeing (Wong *et al.*, 2020).

Secure attachment relationships are central to wellbeing in the early years. Sensitive, responsive caregiving supports emotional security and self-regulation, with research showing that securely attached preschoolers demonstrate better emotional regulation and social competence (Fernandes *et al.*, 2021). These secure relationships enable children to explore their environment confidently and form positive relationships within early years settings.

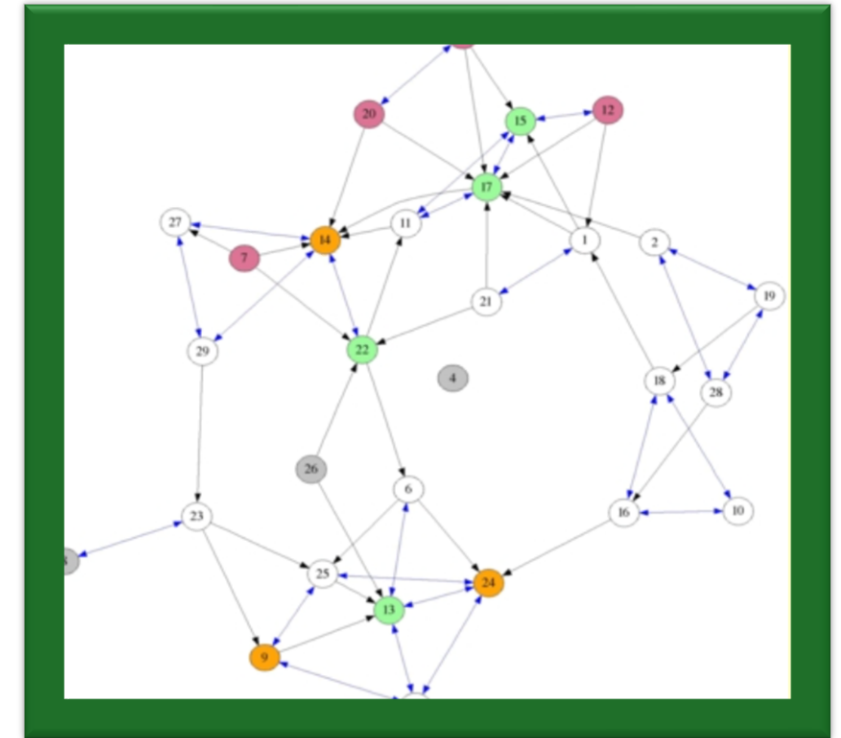
The EYFS framework and supporting guidance state that children's personal, social and emotional development (including emotional wellbeing) is built on strong, warm and supportive relationships with adults who help children feel safe, secure and able to engage in learning. Building positive relationships with caregivers and practitioners helps children learn how to understand and manage their feelings and develop confidence and resilience (DofE, 2025).

The UK Government's framework for improving the mental health of babies, children and young people emphasises the importance of promoting and protecting mental wellbeing from the earliest years, recognising that mental health in early childhood influences both current wellbeing and future life outcomes. The framework identifies modifiable factors and opportunities across the early life course for promoting mental health and preventing poor outcomes, highlighting the role of supportive environments, early identification and joint action across health, education and community services (Department of Health and Social Care, 2024).

The first 1,000 days of life, from conception to age two, are widely recognised as a critical period for brain development, during which early experiences shape children's neurological, emotional and social outcomes (NHS Confederation, 2025). Exposure to Adverse Childhood Experiences (ACEs), such as neglect or household instability, during this period has been linked to an increased risk of mental health difficulties and poorer wellbeing later in childhood (Syed *et al.*, 2025). However, early intervention and nurturing, supportive care can help buffer the impact of adversity and promote healthier developmental outcomes.

Social wellbeing involves children learning to interact, share, communicate and cooperate, and peer interaction supports emotional understanding and social competence. Some children, including those with SEND, may face barriers to social participation, but inclusive practice, structured support and adult modelling can help promote positive social experiences and wellbeing (SEND Network, 2025; Education Endowment Foundation, 2025). El Zaatari and Maalouf (2022) demonstrate that Bronfenbrenner's bio-ecological systems theory explains how children's emotional wellbeing and sense of belonging are shaped through interactions across family, educational and wider social contexts.

Sociograms are a useful observational tool in early years settings for recording children's social interactions and relationships. By identifying patterns of inclusion, exclusion and peer connection, practitioners can recognise children who may be socially isolated and plan targeted support to promote positive social wellbeing and a sense of belonging (*Social interaction and sociocultural theory*, no date).



Robin Banerjee's Sociogram Tools (No Date)

Lifestyles

Children's lifestyles in the early years play a crucial role in shaping their health and wellbeing, as early habits related to nutrition, physical activity, sleep and daily routines can influence both immediate development and long-term health outcomes (Musgrave, 2017).

Establishing healthy eating habits and routines in the early years supports children's wellbeing and learning, with the Eatwell Guide offering clear guidance on balanced nutrition that is reinforced through early years curriculum practices (Public Health England, 2018; DfE, 2023).

Childhood obesity is strongly influenced by family lifestyle factors, including eating habits and daily routines established in the early years. Research highlights the role of parental behaviours and consistent family routines, such as regular mealtimes, in shaping children's obesity risk (Hesketh and Campbell, 2010; Marsh *et al.*, 2019). In line with the EYFS, early years practitioners support healthy lifestyles by promoting positive eating practices and working in partnership with families to encourage consistent routines (DfE, 2023).

Play and outdoor learning are central to promoting physical activity in the early years, providing children with opportunities to develop motor skills, coordination and physical confidence while supporting emotional wellbeing. Active play has been shown to enhance children's self-regulation, social interaction and enjoyment of movement, contributing to healthier lifestyle patterns (Gaskill and Perry, 2017). The EYFS emphasises the importance of daily physical activity and play, recognising their role in supporting children's physical development, wellbeing and long-term health (DfE, 2023; World Health Organization, 2019).

Another barrier to a healthy lifestyle is screen time. Excessive screen time can reduce children's physical activity and is linked with difficulties in concentration and language development, therefore UK health guidance advises limiting screen exposure and prioritising active, interactive play (Veldman *et al.*, 2023; NHS, 2024). Children's lifestyles in the early years are strongly influenced by cultural values, beliefs and traditions, including approaches to discipline, religion, family roles and daily routines. Research highlights that parenting practices and expectations vary across cultures, shaping children's behaviour, emotional expression and participation in everyday activities such as eating, play and learning (Bornstein, 2015). These culturally shaped experiences influence children's social and emotional development and their understanding of acceptable behaviour. In early years settings, recognising and respecting cultural differences is essential to support children's wellbeing and to work effectively in partnership with families.

Socioeconomic disadvantage can affect children's wellbeing by limiting access to resources and increasing family stress, which may impact emotional, social and cognitive development (Duncan, 2015). Bronfenbrenner's ecological systems theory highlights how wider social and economic contexts influence children's development through their everyday environments. In line with this, the EYFS promotes inclusive practice by supporting all children, particularly those facing disadvantage, through nurturing relationships, targeted support and partnership working with families (DfE, 2023).

Role of Practitioner

Early years practitioners play a central role in promoting children's health, wellbeing and healthy lifestyles through daily practice and relationships. Practitioners are responsible for implementing healthy eating policies that ensure meals and snacks are balanced and nutritious, as required by the EYFS safeguarding and welfare requirements (Department for Education, 2025). By modelling positive eating behaviours and working in partnership with families, practitioners help establish consistent routines that support children's physical health and wellbeing.

Creating a safe, inclusive and enabling environment is fundamental to promoting wellbeing. Drawing on the principles of Maria Montessori, practitioners support children's independence, confidence and self-esteem by providing calm, accessible and well-organised environments that encourage self-directed activity and respect for the child. Research on Montessori education highlights that such prepared environments enable children to feel secure, capable and valued, aligning closely with inclusive early years practice (Marshall, 2017). Effective promotion of wellbeing requires multi-agency working, particularly in safeguarding and supporting vulnerable children. Early years practitioners have a duty to work collaboratively with health professionals, social services and other agencies to identify concerns early and ensure appropriate support is in place (Department for Education, 2023). Strong partnerships with parents and carers are also essential, as collaborative working promotes consistency between home and setting and supports children's holistic development (Department for Education, 2021).

Play is a vital component of children's health and wellbeing, supporting physical development, emotional expression and social interaction. The United Nations Convention on the Rights of the Child (UNCRC) recognises play and leisure as a fundamental right for all children (Article 31). Early years practitioners promote this right by providing regular opportunities for active, imaginative and child-led play, enabling children to develop confidence, resilience and wellbeing through meaningful play experiences (United Nations, 1989).

Conclusion

Health, wellbeing and lifestyle factors in the early years are closely interconnected and play a crucial role in shaping children's development and long-term outcomes. This poster has highlighted how early experiences, relationships, environments and routines influence children's physical, emotional and social wellbeing, drawing on theory, policy and research. Early years practitioners are central to this process, using inclusive practice, partnership working and play-based approaches to promote healthy lifestyles and support every child to thrive.

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Presentation script

Today I will be discussing breastfeeding and its importance for health and wellbeing.

I will cover the biological composition of breast milk, the benefits for infants, mothers and society, the challenges and misconceptions surrounding breastfeeding, and the significance of the Nestlé formula marketing scandal.

The World Health Organization (WHO) emphasises that every infant and child has the right to good nutrition, as expressed in the UN Convention on the Rights of the Child (UNCRC), article 24, and that optimal feeding practices are essential for child survival and development.

WHO recommends initiating breastfeeding within the first hour of birth and exclusive breastfeeding for the first six months, followed by the introduction of safe, nutritious complementary foods while continuing breastfeeding up to two years or beyond.

Slide 3

Human breast milk contains unique macronutrients that support both nutrition and immune development.

In addition to lactose, breast milk is rich in human milk oligosaccharides (HMOs) (oligosaccharide which are complex carbohydrates that infants cannot digest.

Instead, HMOs act as prebiotics, selectively feeding beneficial gut bacteria such as BIFI BO BACTERIA and helping establish a healthy intestinal microbiome.

HMOs also contribute directly to immune protection by preventing pathogens from binding to the gut lining and by supporting the development and regulation of the infant's immune system.

Alongside carbohydrates, breast milk proteins play a critical role beyond basic growth.

Human milk contains a higher proportion of whey proteins, which are easily digested and include bioactive components such as lactoferrin, secretory IgA, and lysozyme. LY SO SYME

These proteins provide antimicrobial ANTI MICROBEEUL and anti-inflammatory protection, help regulate immune responses, and protect the infant against infection while their own immune system is still developing.

Together, HMOs and proteins demonstrate that the macronutrients in breast milk function not only as sources of energy and growth, but also as active contributors to immune health and gut development. (kim and yi, 2020)

Slide 4

Breastfeeding provides a wide range of benefits for infants, both in the short and long term. Studies show that breastfed babies experience fewer infections, including respiratory, gastrointestinal, and ear infections, thanks to the antibodies and immune factors present in human milk (Roghair, 2024; NHS, 2025).

Breastfeeding also reduces the risk of sudden infant death syndrome (SIDS) and supports the development of a strong, well-regulated immune system, which helps protect against illness throughout childhood.

In the longer term, breastfed children are associated with lower rates of obesity and type 2 diabetes, and some studies suggest a reduced risk of asthma and allergies.

Research shows that breastfeeding is associated with improved cognitive outcomes and neurodevelopment in children.

Human milk contains long chain poly-unsaturated fatty acids (LCPUFAs) such as DHA and AA, which are critical for brain development.

Meta-analyses have found that breastfed children tend to have higher IQ scores and better academic achievement compared to formula-fed children, even after adjusting for socioeconomic factors ((Zhang et al 2024), Victora et al 2016).

These benefits are not limited to a single region or population Research from around the world consistently shows that breastfeeding improves child health outcomes globally (Roghair, 2024 NHS, 2025).

SLide 5

Breastfeeding provides significant long-term health benefits for mothers.

Research shows that mothers who breastfeed have a lower risk of cardiovascular disease, including heart attacks and high blood pressure, as well as reduced chances of developing type 2 diabetes later in life (Tschiderer et al., 2022 CDC, 2025).

Additionally, breastfeeding is associated with a lower risk of breast and ovarian cancers, with protective effects increasing the longer a mother breastfeeds.

Beyond chronic disease prevention, breastfeeding can support postpartum weight management and promote quicker recovery after childbirth.

These benefits highlight that breastfeeding is not only essential for infant health but also plays a critical role in improving long-term maternal health outcomes globally (Tschiderer et al 2022; CDC, 2025).

Slide 6

Breastfeeding has a range of positive effects that extend beyond individual mother and child health to societal, economic, and environmental levels.

Higher breastfeeding rates help reduce pressure on healthcare systems, as breastfed infants experience lower rates of infections and chronic conditions, leading to fewer hospital admissions and medical interventions (House of Commons Health and Social Care Committee, 2019).

Families also experience financial benefits, since breastfeeding reduces the need to purchase formula, feeding equipment, and related healthcare costs. From an environmental perspective, breastfeeding is highly sustainable. Unlike infant formula, which requires the use of agricultural resources, manufacturing, packaging, and transport, breastfeeding produces virtually no waste and has a minimal carbon footprint.

UNICEF and WHO estimate that increased breastfeeding rates could prevent hundreds of thousands of child deaths per year globally, and save billions in healthcare costs due to reduced infections and chronic diseases.

By promoting population health, reducing healthcare and household expenses, and limiting environmental impact, breastfeeding contributes to public health, economic stability, and sustainability, demonstrating its value not just for individual families but for society as a whole (Karlsson, Garnett & Rollins, 2019)

Slide 7

In the most recent data available, Hywel Dda Health Board shows a pattern of relatively strong breastfeeding continuation compared with some other parts of Wales.

These figures reflect that while a majority of infants in Hywel Dda begin life receiving breast milk, the proportion declines as infants grow older Although the overall trend still aligns with broader Welsh increases in breastfeeding in recent years.

Slide 8

Despite the well documented benefits of breastfeeding, many mothers face significant barriers and negative perceptions that can affect their ability to breastfeed successfully.

Limited access to professional support and guidance, particularly in the early days, can make common challenges such as latching difficulties harder to overcome (Rollins et al., 2016).

A lack of awareness among families about breastfeeding benefits, combined with negative social attitudes, including discomfort with breastfeeding in public, can also discourage mothers (WHO, 2023).

Additionally, workplace challenges such as insufficient maternity leave, lack of breaks, and inadequate facilities for expressing milk further restrict breastfeeding continuation for working mothers (Victora et al., 2016).

These factors highlight the importance of societal support, education, and workplace accommodations to address misconceptions and remove barriers to breastfeeding.

Slide 9

In the 1970s, Nestlé faced major criticism for the way it marketed infant formula in low-income countries.

The company used misleading tactics to promote formula as a modern alternative to breast milk, often distributing free samples in hospitals.

Unfortunately, this practice frequently led to a reduction in mothers' milk supply once the samples ran out, leaving babies dependent on formula. In areas with limited access to clean water and sanitation, unsafe preparation of formula posed serious health risks, including malnutrition and increased infant mortality.

The public outcry over these practices prompted the World Health Organization to introduce the International Code of Marketing of Breastmilk Substitutes in 1981, which still influences regulations on formula marketing in the UK, EU, and worldwide.

(Anttila-Hughes et al., 2018) (Brady, 2012)

Slide 10

Legal frameworks and public health initiatives support breastfeeding by protecting both mothers and infants.

In the UK, mothers have the right to breastfeed in public, and workplaces are legally required to provide breaks and suitable facilities for expressing milk (NHS, 2025).

Parental leave policies further support infant feeding by giving parents time to establish and continue breastfeeding without work-related pressure.

Programs such as the UNICEF Baby-Friendly Initiative promote evidence-based support for breastfeeding in maternity and neonatal services, including skilled lactation guidance and hospital practices that facilitate early initiation (Victora et al., 2016; UNICEF, 2018).

In the UK and EU, marketing of first infant formula (for babies under 6 months) is heavily restricted to protect breastfeeding. Infant formula cannot be advertised to the public, and promotional tactics such as free samples, discounts or gifts to consumers (including pregnant women and mothers) are prohibited.

Any information provided must be scientific and factual and must not imply that bottle feeding is equivalent or superior to breastfeeding.

While follow-on (stage 2) formulas can be marketed, they must be clearly distinguished from first infant formula and must not promote bottle feeding of infant formula in general for example, advertisements must avoid implying nutritional benefits over breast milk.

These rules aim to uphold the spirit of the WHO International Code of Marketing of Breastmilk Substitutes in national law and reduce commercial pressures that could discourage breastfeeding. (UK Government, 2007; European Union, 2016)

These measures create a supportive environment that encourages breastfeeding as the optimal standard for infant nutrition and maternal-child health.

Conclusion

In summary, breastfeeding is a fundamental practice that provides essential nutrition, immune support, and developmental benefits for infants, while also offering significant long-term health advantages for mothers.

Beyond individual families, breastfeeding contributes to societal well-being, economic savings, and environmental sustainability.

Despite these benefits, challenges such as social misconceptions, workplace barriers, and historical formula marketing controversies highlight the need for continued education, support, and protective policies.

By promoting initiatives like parental leave, public breastfeeding rights, and the Baby-Friendly Hospital Initiative, society can create an environment where breastfeeding is supported, accessible, and valued.

Ultimately, ensuring that every child has the opportunity for optimal nutrition aligns not only with public health goals but also with the rights of children under the UNCRC, ensuring healthier generations to come.

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