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AI Statement

I have not used AI in any way for this assignment.

Health, Well-being and Lifestyle

Introduction –

Physical health, emotional well-being, and lifestyle are deeply interrelated concepts which underpin all aspects of early childhood development (Labrum, 2023). Taken together they form the basis of holistic health – an approach which recognises that physical, social, spiritual, and emotional factors cannot be considered in isolation but must be treated as elements of a whole (New South Wales Government, n.d).

This holistic understanding of health is reflected in the Health and Wellbeing Area of Learning and Experience of the Curriculum for Wales [CfW] (Welsh Government [WG], 2020) and the Curriculum for Funded, Non-Maintained Settings (Welsh Government, 2025a), which both emphasise the role of a child-centred, integrated approach to education and well-being.

This poster will explore the physical, social, emotional, and lifestyle-related aspects of health and well-being in early childhood. It will draw on key theorists, policy, legislation, and evidence-based practice to highlight the ways in which early years practitioners can effectively support a child's holistic health and development.



Maslow's hierarchy of needs

Figure 1. Maslow's Hierarchy (Simply Psychology, 2025a)

Physical Health –

The concept of health is a complex and nuanced topic, which has defied unanimous definition (McCartney *et al.* 2019, pp. 22-30). For example, Leonardi (2018, pp. 735-748) defines health as one's ability to endure and control one's own health and wellbeing deficits, whereas the World Health Organization [WHO] (2010, paragraph 2) defines health as 'a state of complete physical, mental and social well-being, not merely the absence of disease or infirmity'. While both definitions draw on a similarly integrated approach to health and well-being, the WHO's view incorporates elements of comfort and life satisfaction (Pinto *et al.* 2017), though it has been criticised for presenting an idealistic understanding of health and failing to consider those for whom total holistic well-being is unachievable (Leonardi, 2018, pp. 735-748).

Central to conversations of early childhood health are considerations of hygiene, healthcare, sleep, and nutrition (Musgrave, 2017, pp. 9-24). Maslow identified these aspects as low-level needs, providing the foundation for all further development, the neglect of which can result in serious adverse effects (Trivedi and Mehta, 2019, pp. 39). While critics of Maslow's work argue that it does not give enough recognition to the fluidity of physiological and psychological needs (Ghaleb, 2024, pp.1035), his hierarchical theory remains foundational to common understanding of health and well-being needs (Johnson *et al.* 2018, pp. 4-17). Furthermore, Maslow's theory is supported by Aming'a (2016), who found that supporting children's basic needs improved their academic performance and overall sense of wellbeing.

The importance of consistently meeting these needs in early childhood, in particular, is established by Musgrave (2017, pp. 44-48), who found that health interventions during the critical development period of conception to age five are more effective than those delivered at any other time. This suggests that, similarly to Maslow's theory, that physiological needs are foundational to learning, early childhood is foundational to adult development (Center on the Developing Child, 2010).

Building on the critical importance of early childhood health and development, Welsh legislation such as the Healthy Child Wales Programme [HCWP] (Welsh Government, 2016) and *Childcare Act 2006* seek to ensure that children's health needs are systematically supported through coordinated early intervention and access to quality childcare. The HCWP provides universal health visiting services, including developmental checks and immunisation support, to monitor and enhance child health outcomes. Complementarily, the *Childcare Act 2006* places a legal duty on local authorities across the United Kingdom to take reasonable steps to ensure childcare provision, recognising the key role of early education in supporting children's physical, emotional and social health.

Together these frameworks reflect the Welsh Government's commitment to upholding children's right to health, established in Article 24 of the United Nations Convention on the Rights of the Child (United Nations, 1989). However, recent funding cuts to health and early years services have undermined the delivery of both programmes – for example, the Institute of Health Visiting (2025) notes that demand for health visiting significantly outweighs staffing levels, which may delay critical development assessment. This suggests that, despite policy commitments, the state may be falling short in delivering timely and equitable access to early health interventions for children.

In summary, current understanding of health in early childhood relies on a complex web of interrelated theories, policy and legislation and plays a critical role informing early years practice, particularly when, as in Wales, health and education are treated as interdependent.

Well-being –

Similarly to health, well-being is a multi-faceted and subjective concept for which there is no unanimous definition (Bautista *et al.* 2023, pp. 1-12). The WHO (2021, pp. 10) defines wellbeing by one's quality of life and ability to contribute meaningfully to the world around them, while Park *et al.* (2022, pp. 16) argues that well-being is best defined as a fluid state dependent upon one's life satisfaction, both day-to-day and overall. However, both definitions have faced criticism for not giving enough recognition to the role of social factors, such as national economic stability and social security, in determining well-being (Fisher, 2019). Proponents of such models, including Leonardi (2018), contend that individual well-being is impossible if one does not consider the social context in which that individual exists. Leading Dodge *et al.* (2012) to propose a new definition of well-being as having the balance of resources required to meet and overcome challenges, arguing that this definition improves applicability due to its simplicity and flexibility.

A similar multidimensionality is reflected when considering key theorists underpinning current understandings of social and emotional well-being and its determinants.

Bowlby's Attachment theory emphasises the role of strong and nurturing attachments to consistent caregivers, particularly focusing on the role of the mother-child relationship, in determining the child's emotional and social development (Holmes, 2014, pp. 162-184). In this theory, the foundational nature of such relationships in the development of key wellbeing skills such as self-esteem, effective communication and emotional regulation is highlighted (Shen, Liu and Brat, 2021, pp. 129-142). However, critics question whether Bowlby's focus on mother-child relationships impacts his relevance to wider discussions of child development and well-being, particularly in relation to non-western cultures (Bicknell, 2024).

In contrast Bronfenbrenner's Ecological Model of Wellbeing, which highlights the different spheres of influence affecting children's experiences and development, as seen in Figure 2, gives equal weight and exploration to the effect of individual, familial, societal, and global influences (Hayes, O'Toole and Halpenny, 2017, pp. 17-21). This leads to a more holistic understanding of the fundamental structures of a child's environment and thus their experience of the world (Eriksson, Mehdi and Hammarström, 2018, pp. 415-431), practically changing the focus of well-being from individual action to social structures, such as policy and legislation, which influence individual and national well-being.

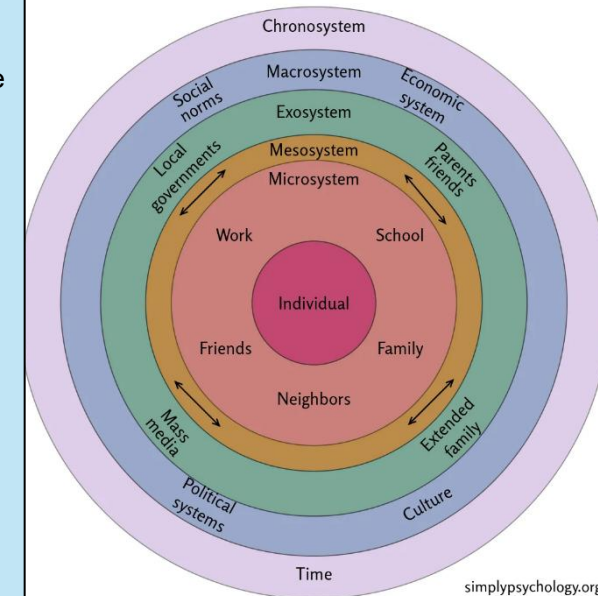


Figure 2. Bronfenbrenner's Ecological Model (Simply Psychology, 2025b)

In Wales, this view is reflected in the *Well-Being of Future Generations (Wales) Act 2015* which acknowledges the key role of governmental provision in supporting lifelong well-being. The Act, which outlines seven interconnected well-being goals designed to promote a healthier and more equal Wales, identifies early years provision as a key driver of these aims (Children's Commissioner for Wales and Future Generations Commissioner for Wales, 2018). Furthermore, by placing a legal duty on all public services to promote social, cultural, economic, and environmental well-being it aims to support young children holistically through a range of well-equipped services (Welsh Government, 2025b). However, the Institute for Government (2024) suggests that recent economic policy, including funding cuts for public services, contradicts this aim by hindering their ability to dynamically provide the level of support required, based on individual and local circumstances.

Primarily, early years practice focuses on supporting well-being in early childhood through inclusivity and resilience building (Soukakou, Dionne and Palikara, 2024, pp. 6; Furu *et al.* 2023). Broadly inclusivity, in this context, refers to making active efforts to educate oneself on the cultures, practices and beliefs impacting the lives of the children in one's care and how they might best be supported and celebrated (Welsh Government, 2024a).

This may mean making exceptions to routines for cultural or religious reasons, providing alternative dietary options for reasons of religious or individual belief, and celebrating non-denominational or diverse festivals or events (Gordon, 2025). An inclusive approach to early education helps to support children in their holistic development and helps to strengthen their feelings of belonging and security, alongside helping them to develop their resilience (Kefallinou, Symeonidou and Meijer, 2020, pp. 135-152).

Resilience refers to one's ability to meet and overcome challenges without suffering long-term setbacks (American Psychological Association, 2018) and plays a key role in determining a child's approach to and experience of life (Barber, 2020). In order to support children's resilience, early years practitioners incorporate elements of emotional and social education into everyday routines (Rao *et al.* 2024). A key method employed to achieve this is to incorporate songs, books and discussions about emotions and social situations into group activities, such as circle time (Housman, 2017). Circle time allows for low-pressure group discussions on important or difficult topics, enabling children to develop the skills and vocabulary to work together, fostering a more respectful and empathetic environment (Glazzard, 2016, pp. 2017-213).

From this, it may be determined that well-being is a deeply individual, socially influenced concept which plays a key role in one's experience and understanding of the world. Furthermore, it is the role of all in society to support young children to improve their well-being through research-backed policy and practice.



Lifestyle –

The WHO (1999) defined a healthy lifestyle as one which reduces the risk of serious illness or premature death, a definition which has remained unchanged despite being expanded upon. An example of this expansion is Barnardo's (2024) definition of a healthy lifestyle as maintaining adequate hydration, eating a balanced diet, engaging in frequent physical activity, following sleep guidance, and preserving one's mental health and well-being. A child's lifestyle has a significant impact on a child's health and well-being, determining a child's physical, social, and emotional development (Dalal *et al.* 2022, pp. 562-568).

Dehydration in infants and young children can pose a serious risk to their health, potentially leading to issues such as reduced urination, increased irritability and even kidney failure in extreme cases (Mayo Clinic, 2025). Practitioners can help children to avoid dehydration by offering regular drinks of water, or formula for children under six months, particularly during warm weather or periods of exertion (National Health Service [NHS], 2022a). This helps children to maintain adequate hydration, compensating for the increased fluid loss caused by perspiration (Loughborough University, 2023). Furthermore, by modelling good hydration habits, practitioners can encourage awareness of situations and environments which may require increased fluid intake (Health Direct, 2024).

Figure 3. Healthy Lifestyle Heart (Physio West, 2021)

Meanwhile, a child's diet has a significant impact on not only the child's physical health but potentially their social and emotional health (Firth *et al.* 2020). For example, approximately 11.8% of children in Wales are classified as obese (Public Health Wales, 2025), making it a growing public health concern. Obesity is typically identified using the Body Mass Index [BMI], which assess whether a child is carrying excess body fat based on their height and weight, which are considered in relation to their age and sex (NHS England, 2024).

Obesity has been linked to an increased risk of diabetes, heart disease, high blood pressure and instances of bullying and discrimination (Sahoo *et al.* 2015, pp. 187-191). This leads to a sense of social isolation, reduced self-esteem, and increased risk of long-term emotional difficulties (Menestrel, 2020, pp. 8-21), impacting a child's prospects for personal success.

However, despite the prevalence of obesity in Wales, issues of malnutrition and vitamin deficiency remain in some Welsh Communities, particularly in low socioeconomic areas (Wales Online, 2024). A comprehensive approach to nutrition must account for both excessive and insufficient intake and recognise the possibility of coexistence (Wells *et al.* 2022, pp. 75-80).

Recent research suggests that childhood nutrition is best improved by fostering a whole family approach to healthy eating (Fulkerson *et al.* 2014, pp. 2-17). Practitioners can support this aim by educating families on the value of healthy eating through signposting to dietary information and programmes, such as Healthy Start (UK Government, n.d) and Universal Primary Free School Meals (Welsh Government, 2024b), alongside providing balanced and affordable meals in settings (Nutrition Skills for Life, 2023).

Practitioners can further support a healthy lifestyle for children by encouraging them to partake in regular physical activity (National Centre for Sport and Exercise Medicine, 2020). Children between the ages of two and five should partake in one-hundred-and-eighty minutes of physical activity every day, of which sixty minutes should be spent engaging in energetic physical activity (NHS, 2022b). This helps to improve their motor skill development, encourage healthy muscle growth and strengthen their cardiovascular system, alongside enhancing well-being (U.S Department of Health and Human Services, 2019, pp. 47-52). Research suggests that physical activity in young children is best encouraged through playful movement, such as dance or themed yoga, as it helps to encourage a positive view on movement (McGowan, Chandler and Gerde, 2023, pp. 2021-2038).

However, a child's ability to participate in physical activity is predicated on having their sleep needs met. Children who do not receive adequate rest show reduced interest in physical activity, a decline in stamina and increased risk of developing mental health conditions (Liu *et al.* 2022, pp. 122-130).

A key influence on sleep quality among the current generation of children is their increased amount of screentime, when compared to previous generations (Education Committee, 2024). This impact is thought to be related to the blue light emissions of modern technological devices, like tablets and televisions, which have been shown to increase cortisol production and delay melatonin production (Summer, 2024). This disrupts the body's natural circadian rhythm, which naturally reduces cortisol and increases melatonin in preparation for sleep (Wahl *et al.* 2019).

Therefore, practitioners can help support children to meet their sleep needs by limiting the children's access to screens in the setting and educating their families on the importance of sleep and the disruptive effect of blue-light-emitting technology (Canadian Paediatric Society, 2017, pp. 461-475).

Taken together, this section indicates the importance of supporting children to achieve and maintain a healthy lifestyle through familial education and direct influence.

Conclusion –

In conclusion, research strongly indicates that supporting the intrinsically linked and fundamental concepts of health, well-being and lifestyle requires a holistic, multidimensional approach. The piece has highlighted the key role that early years' professionals play in delivering this support to young children, helping to enhance their holistic health, foster resilience and promote positive long-term outcomes.

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