

The Life Course Approach to Health and Wellbeing: A Critical Analysis of Social, Economic and Environmental Determinants

Module: BMNS4014 - Living well: A Life course approach to Health & Wellbeing

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Abstract

This report examines the life course approach to health and wellbeing and explores how social, economic and environmental factors shape health across the life span. It is based on a review of relevant academic literature, policy documents and expert commentary, and considers how life experiences and wider conditions influence health outcomes over time. The report finds that health is shaped by a mix of personal, social and structural factors, and that inequalities can build up through the life course if they are not addressed early. It also shows that life course interventions can help improve health and reduce inequalities, but their impact depends on good funding, joined-up services and long-term commitment. The report concludes that stronger action is needed across policy, practice, education and research to improve health and wellbeing throughout life.

Contents

Section	Page
Title	i
Abstract	ii
Contents	iii
Introduction to the life course approach to health and wellbeing	4 – 5
The life course approach and social factors	6 - 8
The life course approach and economic factors	8 - 9
The life course approach and environmental factors	10 - 11
Summary	12
Conclusion and Recommendations	13
References	14 - 15

Introduction

This report examines the life course approach to health and wellbeing and the way social, economic, and environmental factors shape health over time. The life course approach is a way of understanding health as something that develops across a person's whole life, rather than being caused by one single event or choice. It shows how experiences in childhood, adulthood and later life can all affect health and wellbeing (Elder, Johnson and Crosnoe, 2003; Aagard-Hansen et al., 2019).

The topic is important because health inequalities do not appear suddenly. They often build up slowly through the combined effects of family life, education, work, income, housing and local surroundings. Research in life course epidemiology shows that these factors can influence health over many years and shape the risk of long-term illness later in life (Marmot, 2020; Rasmussen et al., 2024). This means that the life course approach is useful not only for explaining health differences, but also for understanding how they can be reduced.

The approach has become more important in recent years because of changes in research, public health and population health needs. More longitudinal studies now follow people across long periods of time, which has helped researchers understand how disadvantages and advantages can build up over the life span (Aagard-Hansen et al., 2019; Burton-Jeangros et al., 2015). It has also increased interest in interventions that work at different stages of life, especially where early action may help prevent later problems (Health Matters, 2019; World Health Organization, 2025).

This report is based on a review of academic literature, policy reports, and public health guidance. It considers, in turn, the impact of social factors, economic factors and environmental factors on health and wellbeing through the life course, as well as the appropriacy and

effectiveness of related interventions. It ends with conclusions and recommendations for the future development of the field.

The Life Course Approach and Social Factors

Social factors play a major part in shaping health and wellbeing across the life course. These include family life, education, social support, culture, and the wider conditions in which people grow up and live. A life course view is useful because it shows that these factors do not affect health in just one moment; they can build up over time and influence later outcomes in both positive and negative ways (Aagard-Hansen et al., 2019; Marmot, 2020).

Family life in early childhood is one of the clearest examples of this. Children who grow up in stable and supportive homes are more likely to have better emotional development, better school experiences and stronger wellbeing later on. By contrast, children who grow up in unstable or stressful homes may face long-term problems linked to stress, poor mental health and lower life chances. The life course approach helps explain this because it shows how early experiences can shape later health, even when the effects are not immediate (Aagard-Hansen et al., 2019). This does not mean early disadvantage decides everything, but it does mean that early support matters a great deal.

Education is another important social factor. It can improve health by giving people knowledge, skills and better opportunities in work and life. Higher educational achievement is often linked with better health because it can lead to better income, better health literacy and more control over life choices (Scriven, Goodall and Morgan, 2023). However, education is not a fair starting point for everyone. Children from poorer backgrounds often have fewer chances and face more barriers, which means education can also be a place where inequality is reproduced rather than reduced. From a life course point of view, this is important because unequal access to education can have effects that last for many years.

Social support and relationships also influence health. People who have strong relationships with family, friends and community are often better able to cope with stress, illness and change.

Social support can protect mental health and help people deal with difficult life events. In contrast, isolation and weak support can make stress worse and increase the risk of poor wellbeing (Wilkinson and Pickett, 2009). This is especially important across the life course because the need for support can change at different times, such as during childhood, parenthood, unemployment or old age. Social ties are therefore not just a comfort; they can shape health in real and lasting ways.

The main strength of social interventions is that they can act early and reach people before problems become severe. Early years support, parenting programmes, school-based health promotion and community projects can all help improve health and reduce inequality (Public Health England, 2019). Their weakness is that they are often short-term, underfunded or unevenly delivered. This means their impact can be limited if wider social conditions stay the same. So while social interventions can help, they are most effective when they are part of a wider plan to reduce inequality across society.



Figure 1: Social determinants of health (SDOH),

intersectionality, and models of disability (National League of Nursing 2023, p. 1)

Overall, social factors are central to the life course approach because they shape opportunity, stress and support over time. They influence health from childhood to later life and help explain why inequalities can continue across generations. The next section looks at how economic factors also shape health and wellbeing through the life course.

The Life Course Approach and Economic Factors

Economic factors have a strong effect on health because they shape what people can afford and what opportunities they have. Income, employment and poverty all matter because they influence access to food, housing, transport, healthcare and other basic needs (OECD, 2020; World Bank, 2024). The life course approach is especially useful here because it shows that economic disadvantages does not just affect a person in the present; it can shape their health for many years.

Income is one of the clearest economic influences on health. People with higher incomes are more likely to afford healthier food, safer homes, and more opportunities for a healthier life. People with lower incomes may struggle to meet everyday costs, which can create stress and limit their choices. Poverty is not simply about having less money. It is also about being more exposed to hardship and having fewer ways to recover from it (OECD, 2020). This matters across the life course because financial pressure in childhood can affect education, relationships, wellbeing and later work opportunities.

Poverty in early life is especially important because it can have long-term effects. A child who grows up in poverty may face poor housing, unhealthy living conditions, stress and fewer educational chances. These disadvantages can then continue into adulthood and affect employment, income and health later on (Aagard-Hansen et al., 2019). The life course approach shows how disadvantage can build up gradually rather than appearing all at once. It also shows why reducing child poverty should be seen as a health issue, not only as a social or economic one.

Employment is another major factor. Good work can support health by providing income, routine, self-esteem and social contact. Poor-quality work, job insecurity or unemployment can have the opposite effect and may lead to anxiety, stress and reduced wellbeing (Marmot, 2020). The important issue is not only whether people have work, but what kind of work they have. A stable and fair job can support health, while insecure work can add to pressure and uncertainty. This is important in a life course view because people may move in and out of work at different stages of life.

Economic interventions include welfare support, minimum wage policies and steps to improve access to secure work (Health Matters, 2019). These interventions can improve health by reducing financial strain and making life more stable. However, their success depends on whether they are strong enough and whether they last long enough to make a real difference. If support is too limited, it may help in the short term but fail to change the longer pattern of inequality. For this reason, economic policy and public health need to be linked more closely.

In summary, economic factors shape health because they affect daily living conditions, future chances and overall security. They are closely tied to social factors and often make existing inequality worse. The next section considers how environmental factors affect health and wellbeing through the life course.

The Life Course Approach and Environmental Factors

Environmental factors also play a major role in shaping health and wellbeing across the life course. These include housing, air quality, neighbourhood conditions, and access to safe outdoor space. The place people live in can support health or damage it over time, especially when poor conditions continue for years. A life course approach shows that environmental harm is often not a one-off event but something that accumulates through repeated exposure.

Housing is one of the most important environmental factors. Poor housing can mean damp, cold, overcrowding or insecurity, and each of these can affect health. Bad housing may lead to breathing problems, disturbed sleep, stress and poorer mental health. It can also affect children's ability to learn and grow well. Safe and secure housing supports wellbeing at every stage of life, while poor housing can create long-term harm (Public Health England, 2019). This is why housing should be treated as part of prevention, not just as a background issue.

Air pollution is another serious environmental concern. Long-term exposure to polluted air can increase the risk of heart and lung disease. People living in poorer areas are often more exposed to this risk, which means environmental harm is not shared equally (European Parliament, 2024). This is important because it shows that environment and inequality are closely linked. Health is not just shaped by what people do, but also by the conditions they are forced to live in. A life course approach makes this clear by showing how repeated exposure can affect health over time.

Neighbourhood conditions also matter. Access to parks, safe streets and green space can help people stay active, social and mentally well. However, these advantages are not equally distributed. People in deprived areas may have less access to clean, safe and pleasant local environments, which can limit opportunities for healthy living (European Parliament, 2024). This

means that the local environment can either support or restrict health choices. In practice, it is much easier to make healthy choices when the environment itself makes those choices possible.

Environmental interventions include improving housing standards, reducing pollution, planning safer transport and increasing access to green space. These actions can improve health, but only if they are properly targeted and fairly delivered. If improvements only happen in better-off areas, then inequalities will remain. Environmental policy therefore needs to be part of wider public health action rather than treated as a separate issue. The life course approach shows that environment matters not only now, but also for future health across the whole lifespan.

Overall, environmental factors shape health by affecting daily living conditions and long-term exposure to risk. They often work alongside social and economic factors, which makes their effect even stronger. The next section brings the main argument together and considers what this means for recommendations.



Figure 2: Health, people and the environment (Environment

Agency, 2020, p.3).

summary

Taken together, social, economic and environmental factors show that health and wellbeing are shaped by a wide range of influences across the life course. These factors do not work separately. Instead, they often build on each other and create patterns of advantage and disadvantage that can last for many years. A life course approach is valuable because it helps explain how these patterns develop and why early action is so important (Aagard-Hansen et al., 2019; Marmot, 2020).

The main body of the report has shown that interventions can help, but only when they are long term, properly funded and part of wider structural change. Short-term or isolated action is less likely to reduce inequality in a lasting way. For this reason, the next section considers the main conclusions from the report and then sets out recommendations for policy, practice, education and research.

Conclusion and recommendations

This report has shown that the life course approach is a useful way to understand how health and wellbeing develop over time. It has highlighted that social, economic and environmental factors do not act separately, but work together across childhood, adulthood and later life to shape health outcomes. Early experiences, access to income and work, and the quality of housing and neighbourhoods all have a lasting effect on health and can either protect people or add to disadvantage. These findings matter because they show that health inequalities are not random and do not appear suddenly. They build up over time and can pass from one stage of life to the next.

The report also found that interventions can make a difference, but only when they are well planned, properly funded and maintained over the long term. Early years support, school-based programmes, income support, employment policies and environmental improvements all have value. However, their impact is limited if they are short term, poorly joined up or unable to reach the people who need them most. The main conclusion is that improving health and wellbeing through the life course requires action that goes beyond individual behaviour and addresses the wider conditions in which people live.

With this in mind, the report ends with the following recommendations.

Policy

- Increase long-term funding for early years support and child poverty reduction.

- Improve access to safe housing and cleaner local environments in deprived areas.
- Strengthen policies that support secure work, fair pay and financial stability.

Practice

- Improve joint working between health, education, housing and social care services.
- Train front-line staff to recognise the wider causes of poor health.
- Make support easier to access for families and individuals at risk of disadvantage.

Education

- Teach the wider causes of health more clearly in schools and training courses.
- Improve health literacy from an early age.
- Include life course ideas in the training of health and social care workers.

Future Research

- Carry out more long-term studies on how disadvantage affects health over time.
- Test which interventions work best at different stages of life.
- Improve data on how social, economic and environmental factors work together.

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