2406546 ECEY5009/C Words: 1,899

Health, Well-being, and Lifestyles

Introduction:
The purpose of this poster is to define the concepts of health, well-being, and lifestyle; address issues within each area; and apply that information to early years practice. Early-year experiences significantly impact a child's entire lifespan in terms of cognitive, physical, and social development (Marmot, pg. 60, 2010). Many agencies and individuals across the UK aim to improve the health and well-being of young people in the hopes of improving the health and well-being of the whole population. The Marmot Review lays out policy goals to create a society that allows individuals to reach their full potential, and ensure rights such as health, social justice, and sustainability (Marmot, pg. 40, 2010). According to the article, Little Pieces, Big Picture, on the Save the Children UK website, the current approach to equality for all in Wales is like a puzzle still being solved. Many components have been pieced together and are working in unison to solve inequalities, but the key pieces needed to complete the puzzle are still missing (Consulting et al., pg. 23, 2018).

Concepts:
The three concepts of health, well-being, and lifestyle all overlap and affect one another, meaning that if someone's health is declining, so is their well-being and lifestyle. A large-scale study done in 2022 "showed the positive association between a healthy lifestyle...and different dimensions of mental health and well-being" (Hautekiet, et al., 2022). This means that it is vital that everyone, especially children, have access to resources that improve all three concepts.

Health:
Health during the early years is necessary for proper physical, social, and cognitive development. Longitudinal research has found that brain development during the early years is dependent on factors such as positive relationships, experiences, and environments. (Childcare Canada, 2021). Brain development is just one aspect of health that determines how successfully a person functions in society. Another aspect of health is where a person lives and their economic status. Studies have shown that if someone is either living in a deprived area or is below a certain level of economic status, they are much more likely to suffer health problems (Public Health England 2017; Dahlgren and Whitehead, 2006; and Marmot, Ch. 1, 2020). Public health communities must advocate for a change to be made to the social determinants of health to improve the well-being and lifestyle of all people (Dahlgren and Whitehead, pg. 23, 2021).

Source: adapted from Dahlgren and Whitehead, 1991

Harvard University found that there wouldn't be as much of a need for health promotion and disease prevention for adults if more were done earlier in the lifecycle to "mitigate the adverse impacts of toxic stress in the prenatal and early childhood periods" (Harvard University, pg. 3, 2010). Dahlgren and Whiteheads (2021). The Rainbow Model of Health provides many health determinants outside the typical health services. It differs from other models of health in the sense that it is about health determinants, rather than the specific causes of diseases.

Well-being:
Well-being is a difficult concept to define, because many academics define it differently, however, there is typically a trend among the definitions. One academic says, "Well-being indicates one is doing well emotionally, and feeling comfortable with oneself as a person" (Laevers, pg. 8, 2005). Another academic defines well-being as a dynamic state where a person's work productivity, creativity, and overall potential increase (GO-Science, section 2, 2008). 'Stable well-being' is defined as an individual having access to the resources they need to meet challenges that arise (Doge, et al., 2012). More recently, and with a little more depth, other academics have defined well-being by separating the concept into four layers, including objective, experiential, reflective, and narrative. The definition given is "well-being arises directly from a system for adaptive motivation and offers a set of fundamental principles and processes that may underlie diverse conceptualizations of well-being" (Jarden, et al., 2023). To understand how well-being affects children, we need to first understand how children define well-being. One study found that most children identify well-being through their relationships with friends and family, as well as having a sense of security (Einardsdottir, 2011). Happiness is an emotion often associated with the concept of well-being and is something children are more familiar with. One study analyzed interviews about how children perceive and define happiness. The children associated happiness with positive emotional states such as love, fun, and excitement. They then correlated happiness with active events such as being with family and friends, playing with their favorite toys, eating their favorite food, etc. (Hong, et al., 2015). The Well-being of children drastically depends on the well-being of their caregivers, which is why it's important to also consider what resources are available to help parents specifically. While it's not always possible to immediately help families with deep-rooted problems, support networks, and communities exist to minimize the effects of larger issues such as economic and environmental crises. (Public Health Wales, n.d.).

Lifestyle:
A healthy lifestyle is a general term for engaging in activities that maintain physical and mental health. It is a way of life that helps you, as well as your family and others around you succeed. A healthy lifestyle is "a way of living that lowers the risk of being seriously ill or dying early...helps you enjoy more aspects of your life... [and] helps your whole family... particularly children" (WHO, 1999). Although this information from the World Health Organization is dated, it is still supported in more recent articles. For example, an article published in 2015 goes into detail about the habits that lead to an unhealthy lifestyle such as unhealthy diet, smoking, alcohol and drug abuse, etc. The article defines lifestyle as the "day-to-day behaviors and functions of individuals in job, activities, fun and diet" (Farhud, 2015). One factor that plays into how healthy someone's lifestyle can be is their socioeconomic status. Research suggests that a low socioeconomic status can lead to an increase in health problems due to the stress caused by crime and violence typically associated with low-income areas (Harvard University, pg. 7, 2010). Through multiple agencies across the world working together, children can realize their potential, and obtain a future without poverty, regardless of their family's current socioeconomic status (Welsh Government 2024a; and Joseph Rowntree Foundation, 2019). In a recent study that compared socioeconomic status leading up to the pandemic and during the pandemic, it was discovered that "the absolute poverty rate for children in families with three or more children, who make up around 30% of all children, was 38% in 2019-20" and the "absolute poverty rates for black (43%) and Asian (41%) children were nearly twice as high as for the white children (22%) in the years leading up to the pandemic" (Cribb, pg. 6-7, 2022). Healthy lifestyles are difficult to achieve when living in absolute poverty, which means the government and public health agencies could do more to assist children living in absolute poverty reach their full potential.

Application for Early Years Practice:
Parents, especially new and young parents, need support to help with their own health, well-being, and lifestyle, just as much as children need the same support. The Marmot Review (2010) lists out six policy objectives meant to give every child the best start in life: "Give every child the best start in life; enable all children, young people, and adults to maximize their capabilities and have control over their lives; create fair employment and good work for all; ensure healthy standard of living for all; create and develop healthy and sustainable places and communities; and strengthen the role and impact of ill health prevention" (pg.94). A review of the Marmot review ten years later listed recommendations for taking action: "Develop a national strategy for action on the social determinants of health with the aim of reducing inequalities in health; ensure proportionate universal allocation of resources and implementation of policies; early intervention to reduce health inequalities; develop the social determinants of health workforce; engage the public; develop whole systems monitoring and strengthen accountability for health inequalities" (Marmot, pg. 147, 2020). Adverse Childhood Experiences or ACEs are "traumatic events, particularly those in early childhood that significantly affect the health and well-being of people" (Public Health Wales, 2020). ACEs are vital for all practitioners to be familiar with and aware of due to the high likelihood of interacting with people who have ACEs. When addressing ACEs, multiagency cooperation and communication are necessary to give children and families the best support possible. It is also important to remember to share vital information and evidence about what ACEs are, and what different organizations can do to help mitigate and prevent them. Multiagency collaboration is set in place to not only support families but also support practitioners. According to a survey done in 2013, most practitioners reported not receiving the support they needed and requested (Payler and Georgeson, pg. 393, 2013).

It is known to most practitioners within the field that professionals and organizations need to collaborate, but the steps to get there are still unclear (Solomon, pg. 391, 2019). There are three programs within schools to help promote health and well-being, currently being used, and are great starting points for further action that is still needed. The first is an annual weight and height measurement done by a school nursing team. The information gained from those measurements is added to the Public Health Wales Observatory which analyzes the data to learn how children are growing. It will also be added to the child's health record so doctors can observe and monitor the health of every child (Public Health Wales, 2024). The second program run by the Welsh Government provides breakfast to primary schools to "improve the health and concentration of children and to assist in the raising of standards of learning and attainment" (Welsh Government, pg. 2, 2014). This program is important because not only does it assist in raising national health and education standards, but it also assists families who may be lower on the socioeconomic ladder who need a little more support. The final program worth noting is 'Designed to Smile', an "oral health improvement program to improve the dental health of children in Wales" (Welsh Government, pg. 15, 2014). This program allows schools to teach children how to properly brush their teeth by practicing every day after breakfast. Programs like these are important for supporting the health, well-being, and lifestyles of children and their families. The Children's Commissioner for Wale's has the goal for "a country where services work together to give children and young people a one-stop, 'no wrong door' support for mental health and well-being" (2022).

Conclusion:
The three concepts of health, well-being, and lifestyle are important for any person, no matter their age or stage in life, but they are especially important for young children in their early years, due to constant development physically, socially, and cognitively. All three concepts are needed and necessary for a person to positively function in today's world. When one is negatively affected, it in turn negatively affects the others. On the other hand, when you improve one, the others improve with it. All practitioners should understand each concept, and how they can work with people to improve each one. Since most practitioners don't work to improve all three together, multiple agencies and professionals need to work together. There are programs within schools working to improve each concept among children and adolescents, however, there is always room for more.

References

References for Poster

Childcarecanada.org. (2021). Big change starts small | childcarecanada.org. [online] Available at: https://childcarecanada.org/documents/research-policy-practice/21/06/big-change-starts-small [Accessed 7 Jan. 2025].

Children's Commissioner for Wales. (2022). Our Plan for all Children and Young People 2019-22: Evaluation. [online] Available at: https://www.childcomwales.org.uk/our-plan-for-all-children-and-young-people-2019-22-evaluation/ [Accessed 7 Jan. 2025].

Consulting, A., Davies, L., Telfer, C., Drysdale, S. and Rees, C. (2018). Little Pieces. Big Picture. [online] Save the Children UK. Available at: https://www.savethechildren.org.uk/content/dam/global/reports/education-and-child-protection/stc-wales-childcare-report-2017.pdf [Accessed 7 Jan. 2025].

Cribb, J., Waters, T., Wernham, T. and Xu, X. (2022). Institute for Fiscal Studies Living standards, poverty and inequality in the UK: 2022 IFS Report R215. [online] Institute for Fiscal Studies. The Institute for Fiscal Studies. Available at: https://ifs.org.uk/sites/default/files/output_url_files/R215-Living-standards-poverty-and-inequality-in-the-UK-2022.pdf [Accessed 7 Jan. 2025].

Dahlgren, G. and Whitehead, M. (2006). WHOLIS E89384. [online] Available at: https://iris.who.int/bitstream/handle/10665/107791/E89384.pdf?sequence=1&isAllowed=y [Accessed 7 Jan. 2025].

Dahlgren, G. and Whitehead, M. (2021). The Dahlgren-whitehead Model of Health Determinants: 30 Years on and Still Chasing Rainbows. Public Health, [online] 199(1), pp.20–24. doi:https://doi.org/10.1016/j.puhe.2021.08.009.

Dodge, R., Daly, A.P., Huyton, J. and Sanders, L.D. (2012). The challenge of defining wellbeing. International Journal of Wellbeing, [online] 2(3). Available at: https://www.internationaljournalofwellbeing.org/index.php/ijow/article/view/89 [Accessed 7 Jan. 2025].

Einarsdottir, J. (2011). Icelandic Children's Early Education Transition Experiences. Early Education & Development, [online] 22(5), pp.737–756. doi:https://doi.org/10.1080/10409289.2011.597027.

Europe, W.H.O. (1999). Healthy living: what is a healthy lifestyle? iris.who.int. [online] Available at: https://iris.who.int/handle/10665/108180 [Accessed 14 Jan. 2025].

Farhud, D. (2015). Impact of Lifestyle on Health. [online] Nih.gov. Available at: https://pmc.ncbi.nlm.nih.gov/articles/PMC4703222/ [Accessed 14 Jan. 2025].

Government Office for Science (2008). Mental capital and wellbeing: making the most of ourselves in the 21st century. [online] GOV.UK. Available at: https://www.gov.uk/government/publications/mental-capital-and-wellbeing-making-the-most-of-ourselves-in-the-21st-century [Accessed 6 Jan. 2025].

Harvard University (2010). the foundations of lifelong health are Built in early childhood. [online] Center on the Developing Child. Available at: https://developingchild.harvard.edu/wp-content/uploads/2024/10/Foundations-of-Lifelong-Health.pdf [Accessed 7 Jan. 2025].

Hautekiet, P., Saenen, N.D., Martens, D.S., Debay, M., Van der Heyden, J., Nawrot, T.S. and De Clercq, E.M. (2022). A healthy lifestyle is positively associated with mental health and well-being and core markers in aging. BMC Medicine, [online] 20(1). doi:https://doi.org/10.1186/s12916-022-02524-9.

Hong, Y., Ra, Y. and Jang, H. (2015). Asia-Pacific journal of research in early childhood education. [online] Pecerajournal.com. Available at: https://www.pecerajournal.com/detail/67437 [Accessed 7 Jan. 2025].

Jarden, A. and Roache, A. (2023). What Is Wellbeing? International Journal of Environmental Research and Public Health, [online] 20(6). doi:https://doi.org/10.3390/ijerph20065006.

Joseph Rowntree Foundation (2019). JRF. [online] JRF. Available at: https://www.jrf.org.uk/ [Accessed 7 Jan. 2025].

Laevers, F. (2005). Well-being and Involvement in Care A process-oriented Self-evaluation Instrument for Care Settings Sics (Ziko). [online] Kind & Gezin and Research Centre for Experientel Education. Available at: Add a little bit of body text [Accessed 7 Jan. 2025].

Marmot, M. (2010). Fair Society, Healthy Lives: the Marmot Review. [online] Institute and Health Equity. The Marmot Review. Available at: Add a little bit of body text [Accessed 6 Jan. 2025].

Marmot, M., Allen, J., Boyce, T., Goldblatt, P. and Morrison, J. (2020). Marmot Review 10 Years On - Institute of Health Equity. [online] Institute of Health Equity. Available at: Add a little bit of body text [Accessed 6 Jan. 2025].

Payler, J. and Georgeson, J. (2013). Multiagency working in the early years: confidence, competence and context. Early Years, [online] 33(4), pp.380–397. doi:https://doi.org/10.1080/09575146.2013.841130.

Public Health England (2017). Social Determinants of Health. [online] GOV.UK. Available at: Add a little bit of body text [Accessed 7 Jan. 2025].

Public Health Wales (2020). Adverse Childhood Experiences - Public Health Wales. [online] Nhs.Wales. Available at: Add a little bit of body text [Accessed 6 Jan. 2025].

Public Health Wales. (2024). Parents Information. [online] Available at: Add a little bit of body text [Accessed 7 Jan. 2025].

Public Health Wales. (n.d.). The First 1000 Days programme. [online] Available at: Add a little bit of body text [Accessed 7 Jan. 2025].

Solomon, M. (2019). Becoming comfortable with chaos: making collaborative multi-agency working work. Emotional and Behavioural Difficulties, 24(4), pp.1–14. doi:https://doi.org/10.1080/13632752.2019.1633743.

Welsh Government (2014). Free breakfast in primary schools Statutory guidance for local authorities and governing bodies Guidance. [online] Available at: Add a little bit of body text [Accessed 7 Jan. 2025].

Welsh Government (2024). Child Poverty Strategy for Wales. [online] Available at: Add a little bit of body text [Accessed 7 Jan. 2025].

References for Presentation