

Social determinants of child health and policy development

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Social determinants of child health

Sign in the Clinton campaign headquarters in Little Rock in 1992:

- *Change vs. more of the same*
- *The economy, stupid*
- *Don't forget health care*

Social Determinants of Child Health

“There is nothing that is more important to Wales' future than our children...The future prosperity and success of Wales lies with the young people and children of today...”

Rhodri Morgan at the launch of the Child Health NSF, Sept. 2005



Health Policy in Wales: Key Papers

- Better Health, Better Wales;
- Targeting Poor Health (Townsend);
- Review of Health & Social Care in Wales (Wanless 2003);
- Well Being in Wales;
- Designed for Life.



Health Policy in Wales

- Dual Strategy – improving services, addressing inequalities in health;
- Acknowledging and endorsing the role of ‘other’ agencies: *‘a health and not an illness service’*.



Wanless Report - 2003

- Involvement of citizens and communities, taking responsibility for health (full engagement);
- Realignment of services to focus on prevention and early intervention;
- Policies evidence based.

Towards 'full engagement'

- Engaging citizens;
- Cross department working – partnership working;
- Health over health care;
- Public health performance measures (not process measures);
- Primary prevention strategies;
- Address social determinants of health.

Children's Policy in Wales

- UN convention on the rights of the child;
- Children and Young People's Partnerships;
- Child Health NSF and participation;
- Children & Young People: Rights to Action;
- One Wales.



The UN Convention on the rights of the child

Adopted by the Assembly as 'the basis of all our work for children and young people in Wales'. Seven core aims:

- Have a flying start in life;
- A comprehensive range of educational opportunities;
- Best possible health, free from abuse, victimisation and exploitation;
- Access to leisure, culture and sport activities;
- Listened to and treated with respect and have racial and cultural identity recognised;
- A safe home and community which supports wellbeing;
- Not disadvantaged by poverty



Children & Young People's Partnerships

- Multi-agency strategic groups at local level;
- Statutory & voluntary sector involvement;
- Birth to 10 and 11-25 years;
- Initial plans for better local services for children and young people by September 2008;



National Service Framework

- Published by Assembly 2005;
- Services that can be expected by children and their families in Wales;
- *"all children and young people achieve optimum health and well being and are supported in achieving their potential"*
- Involvement of children, young people and their families in developing NSF... *'every step of the way...'*
- Based on UN Convention, with 21 standards and 203 actions.



Children and Young People: Rights to Action

- Follows previous papers in series:
 - *Children and Young People: A Framework for Partnership;*
 - *Extending Entitlement: supporting young people in Wales*
- Founded on UN Convention;
- Services to be based on need;
- Highest needs prioritised;
- Commitment to listening to and acting on the views of families and children;
- Commitment to partnership between relevant agencies.



One Wales...for children

- Health care – school nursing, CAMHS;
- Social Care – vulnerable, looked after children, carers, homelessness;
- Safe routes to school;
- A range of education reforms;
- Improving childcare provision;
- Equality, community development and community cohesion;
- Anti-poverty measures;
- Youth justice;
- Culture, language, sports provision

Source: Children in Wales website



Health Policy in the UK

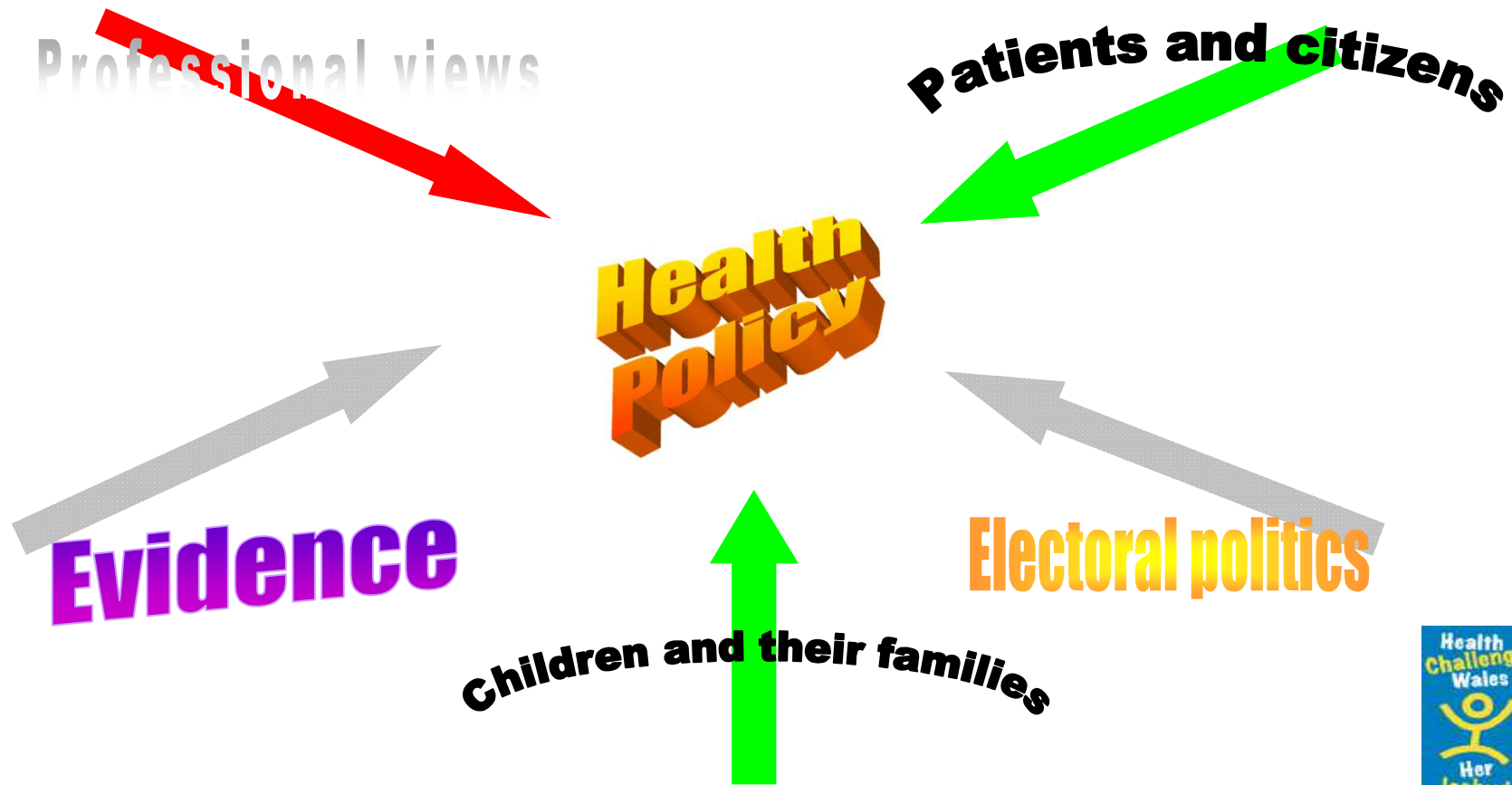
- Focus on acute care as focus for performance assessment;
- Low level of investment in public health and health improvement;
- Historical, rather than evidence based;
- Health care rather than health focus;
- Neglect of public health reports: Black, Acheson, Wanless?

Making Health policy

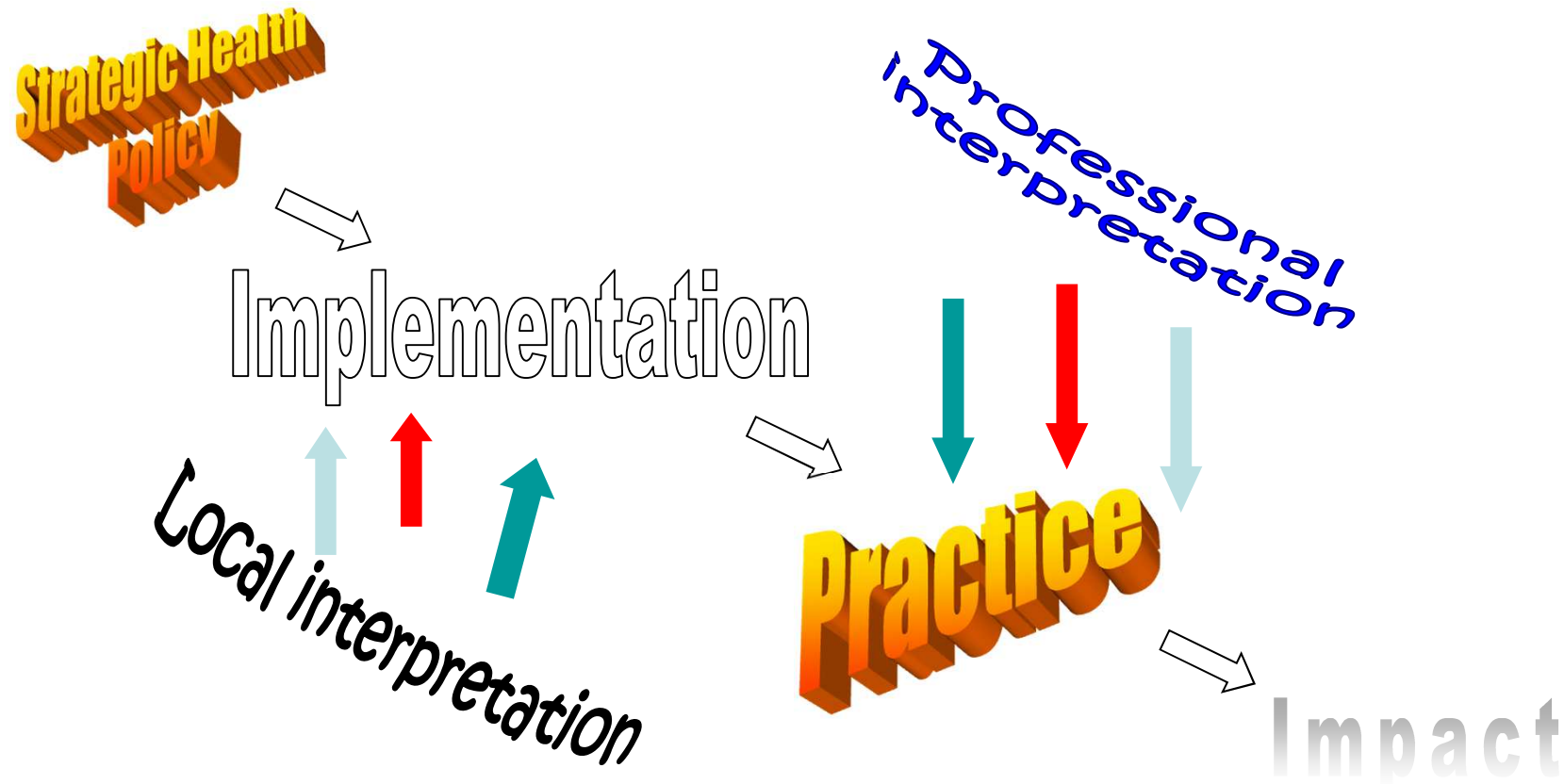
- Evidence is only one component;
- Policy is made at many levels: from macro (strategic/national) to local to practitioner levels – eg Healthy Schools;
- Modern policy often emphasises a role for citizens or stakeholders – eg NSF ;
- Involving stakeholders and evidence-based policy may be incompatible or at best difficult...but both are desirable.

Making Health Policy

Which are the greatest influences?



From Policy to Change



A policy agenda for child health

- Emphasis on preventing ill health and supporting wellbeing – full engagement from an early age;
- Anti-poverty strategy – central to addressing the social determinants and improving child health.
- Promoting capability, resilience and health capital formation:
 - Support, opportunity and investment...the long term approach
- Inclusion of children in decision-making.

A research agenda for child health

- What works in Wales? – evaluation research, complex interventions addressing social determinants;
- How can children and their families effectively participate in all aspects of society...especially those who have the greatest needs...cultural embeddedness of the individual in society?
- The 'well adjusted child'
- What interventions might build capability, resilience and health capital in young people?
- Does partnership working have the health benefits at the community and/or individual level that policy-makers assume?