

Prioritising health in the early years

**Statement from an international policy workshop,
February 2024**

‘Thrive by five’: We need transformational changes to address the worrying decline in children’s health and wellbeing.

Governments have a key role to play in addressing inequities and establishing the systems and support frameworks to drive these changes.

A recently published report from the Academy of Medical Sciences, ‘Prioritising early childhood to promote the nation’s health, wellbeing and prosperity’¹ highlighted how the health and wellbeing of young children, aged 0 - 5 years, has deteriorated markedly in the UK. The UK is also seeing an increase in health inequity, with children from more disadvantaged backgrounds experiencing poorer health outcomes over their lifetime.

Similar trends have been seen in some other high-income countries, and in February 2024, the Academy of Medical Sciences convened a policy workshop with over 40 representatives from the UK, Australia, Canada, Japan, New Zealand, Singapore, South Korea, and the US. The workshop reviewed the current state of play in respective countries and the initiatives that are being taken to improve child health and wellbeing, and address inequities. Participants included parent representatives, who provided critical input from the health and social care service-user perspective, as well as researchers and policy professionals.

Participants noted that recent trends have major consequences. Exposures and experiences in early life can have a long-lasting influence on mental and physical health for later life, so poor health and delayed development in childhood could last throughout adulthood.¹ **The early years of life, therefore, provide a crucial window of opportunity to improve health in the short and long term.** As well as being a lost opportunity for individuals, this is also having profound consequences across nations more broadly, due to poor health outcomes leading to increased economic costs to society.

Workshop participants highlighted how child health, development and wellbeing are highly dependent on social and environmental factors, with many being related to poverty, discrimination, and racism. Factors include access to safe local and online environments, green and play spaces, opportunities to develop academic and social skills, food security, quality of work and economic opportunities for caregivers, quality of housing, and availability of healthcare and social support services. It was argued that **multiple aspects of modern life are preventing parents of young children and other caregivers from providing a supportive and nurturing environment in the countries represented at the workshop.** As well as affecting child and family health and wellbeing, these factors are also deterring adults from starting a family, particularly in some Asian countries, where birth rates have fallen alarmingly.

¹ Academy of Medical Sciences (2024). *Prioritising early childhood to promote the nation’s health, wellbeing and prosperity*. <https://acmedsci.ac.uk/file-download/96280233>

To address these challenges, workshop participants suggest that in their respective countries:

1. **Children and families should be at the heart of developing solutions** to better health, education, wellbeing, and equity. These solutions will require a unifying, cross-sectoral vision at local, regional, and national levels using evidence to inform decisions.
2. **This unifying, cross-sectoral vision will enable governments to address the inequities**, often driven by poverty, discrimination, racism, and other social determinants, which are leading to the decline in children's health and wellbeing.
3. **Transformational change will be needed over generations** to improve child health and wellbeing, so policies and funding must be sustained and co-ordinated to tackle inequities.
4. **We already have a strong evidence base to support some effective solutions**, as highlighted in the Academy's UK report¹ and by participants at the workshop; policymakers should focus on implementing these solutions, working closely with children and families.
5. **Researchers should work across borders and disciplinary boundaries** to investigate the factors affecting the health and wellbeing of young children. This should be supported by effective, co-ordinated longitudinal data platforms (e.g. ECHILD²), to allow for nimble surveillance, evaluation of programmes and policies, and economic assessments to guide resource allocation decisions.

Participating academy and society endorsements

Academy of Medical Sciences

Australian Academy of Health and Medical Sciences

Japan Society for the Promotion of Science London

Royal Society Te Apārangi

Singapore National Academy of Science

Further endorsements

Cambridge Children's Hospital

World Federation of Public Health Associations

UCL Great Ormond Street Institute of Child Health

University of Liverpool

The Global Maternal and Child Oral Health Center at Seoul National University

Edwin SH Leong Centre for Healthy Children, University of Toronto

² UCL (2024). *ECHILD project website: ECHILD stands for Education and Child Health Insights from Linked Data*. <https://www.ucl.ac.uk/child-health/research/population-policy-and-practice-research-and-teaching-department/cenb-clinical-20>

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Opinions expressed in this report do not necessarily represent the views of all participants at the event, the Academy of Medical Sciences, or its Fellows.

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