

Jackie Musgrave

SUPPORTING  
Children's Health  
and Wellbeing



Los Angeles | London | New Delhi  
Singapore | Washington DC | Melbourne



Los Angeles | London | New Delhi  
Singapore | Washington DC | Melbourne

SAGE Publications Ltd  
1 Oliver's Yard  
55 City Road  
London EC1Y 1SP

SAGE Publications Inc.  
2455 Teller Road  
Thousand Oaks, California 91320

SAGE Publications India Pvt Ltd  
B 1/I 1 Mohan Cooperative Industrial Area  
Mathura Road  
New Delhi 110 044

SAGE Publications Asia-Pacific Pte Ltd  
3 Church Street  
#10-04 Samsung Hub  
Singapore 049483

---

Editor: Jude Bowen  
Associate editor: George Knowles  
Production editor: Nicola Marshall  
Project manager: Jeanette Graham  
Copyeditor: Sharon Cawood  
Proofreader: Rosemary Campbell  
Indexer: Anne Solamito  
Marketing manager: Dilhara Attygalle  
Cover design: Wendy Scott  
Typeset by: C&M Digitals (P) Ltd, Chennai, India  
Printed in the UK

© Jackie Musgrave 2017

First published 2017

Apart from any fair dealing for the purposes of research or private study, or criticism or review, as permitted under the Copyright, Designs and Patents Act, 1988, this publication may be reproduced, stored or transmitted in any form, or by any means, only with the prior permission in writing of the publishers, or in the case of reprographic reproduction, in accordance with the terms of licences issued by the Copyright Licensing Agency. Enquiries concerning reproduction outside those terms should be sent to the publishers.

**Library of Congress Control Number: 2017933081**

**British Library Cataloguing in Publication data**

A catalogue record for this book is available from the British Library

ISBN 978-1-4739-3031-5  
ISBN 978-1-4739-3032-2 (pbk)

At SAGE we take sustainability seriously. Most of our products are printed in the UK using FSC papers and boards. When we print overseas we ensure sustainable papers are used as measured by the PREPS grading system. We undertake an annual audit to monitor our sustainability.

# 1

## CHILDREN'S HEALTH IS EVERY PROFESSIONAL'S RESPONSIBILITY

### CHAPTER AIMS AND OBJECTIVES

- To explore definitions of health and wellbeing
- To identify the responsibility of professionals in relation to supporting children's health and wellbeing

### Introduction

The title of this chapter reflects the ideology that all adults have a responsibility for supporting the health of our youngest citizens. This responsibility links to the UK Government's approach to safeguarding children. The Working Together to Safeguard Children (HM Government 2015) guidance states that part of safeguarding is 'preventing impairment to health' (p. 5). This statement suggests that we all have a responsibility to maintain good health as well as to prevent children from acquiring health-threatening conditions.

In order to consider the responsibility of professionals in relation to supporting children's health, the chapter adapts Bronfenbrenner's ecological systems theory (1979, 1994) to illustrate how each of the systems surrounding the child bears a responsibility to support children's health. By supporting children's health and doing your utmost to promote good health and avoid ill health, your actions will, in turn, help to promote children's wellbeing. As well as supporting children's health, part of your responsibility is to avoid injuries that can leave a legacy of disability or even death. However, before we can explore how your responsibility for supporting children's health can be carried out, it is important that you have an understanding of the definitions of health and wellbeing. It is also important that you have an understanding of the factors that can contribute to and cause children to have *ill* health, in order to be able to carry out your role in preventing and maintaining good health. An aim of the chapter is also that you will develop your own definition

of health (and the causes of ill health) that is useful to apply to the children and families in your setting.

### Defining health

Health is a nebulous concept and defining what we mean by health can be challenging. Part of the difficulty associated with our understanding of health is possibly that there is no universally accepted definition of what health is. However, a book about health would not be complete if it did not include the World Health Organization (1986) definition of health, which is as follows:

The extent to which an individual or group is able, on the one hand, to realize aspirations and satisfy needs; and, on the other hand, *to change or cope with the environment*. Health is, therefore, seen as a resource for everyday life, not the objective of living; *it is a positive concept emphasizing social and personal resources*, as well as physical capacities. [Italics added]

This definition is an ambitious attempt to offer an explanation that fits all. The words *to change or cope with the environment* are important because part of your role is to enable the environment for all children. However, your ability to understand how to change the environment for children with a health condition may make the difference to their being included in their early learning. Asthma is an example of a health condition that will require you to adapt the environment by removing or reducing 'triggers' that may provoke asthma symptoms (this will be discussed further in Chapter 9).

Helena Green, a student practitioner, offers an explanation of what health means to her:

Supporting children's health means to me, that their basic needs are met. Additionally, they are supported by family and professionals to develop mentally and physically at a rate that is suitable to the individual and their context.

Helena's explanation of how she sees her role in supporting children's health takes an holistic view of the child, and the child's health is an intrinsic part of the child. Helena sees the context of children's lives and the support of family and professionals as being essential to supporting children's health. Her definition resonates with Bronfenbrenner's ecological systems approach and also lends itself to a social model of health.

### The medical and social model of health

These terms are often used to describe approaches to health and ill health. As the complexities and determinants that influence health are better understood, it is important that health conditions are not looked at in isolation, that is, the social model is used to improve health. However, for early years practitioners, there is a need to adopt a medical model as well.

*The social model of health* takes an holistic view of the impact of health, or ill health, on individuals, meaning that the social, emotional and environmental factors are taken into account. In relation to children, it is vital that their care and education needs are also taken into consideration. As early years practitioners, it is likely that this will be a natural tendency to address the whole child and their family when looking at the impact of health on children's inclusion.

*The medical model of health* can be described as taking a biological or physical approach to health, which focuses on a specific health condition. Diagnosis of a condition, such as diabetes, means that there is an evidence-based approach to treatment. Knowing the signs and symptoms and understanding the treatment and management of health conditions means that you will be better equipped to minimise the impact of the condition and maximise children's participation.

### Defining wellbeing

Wellbeing can be examined from philosophical, economic, psychological, sociological and health perspectives. The range of contexts that can influence wellbeing means that the concept of wellbeing is also nebulous and, again, there are many definitions. The *Oxford English Dictionary* defines wellbeing as 'the state of being comfortable, healthy or happy'. Statham and Chase (2010) define wellbeing as 'generally understood as the quality of peoples' lives ... it is understood ... in relation to objective measures, such as ... health status' (p. 2).

### Children's health and wellbeing: a personal view

Your understanding of health and wellbeing will be shaped by your experiences and your professional role. For example, many years ago when I worked as a sick children's nurse in a hospital, I nursed children who were unwell and the aim of my work was to make a contribution to restoring children back to health. At that time, I considered that children's health could be interrupted by an event that made them 'sick', they came into hospital for an intervention that restored them back to health and, in turn, their wellbeing would be improved.

My view of children's health and wellbeing changed after I became a lecturer in a college where I taught child health modules to early years students. I realised that my experience as a nurse caring for sick children had given me a snapshot of one perspective. When I started to teach experienced practitioners who were students on an Early Years Foundation Degree, I learnt from students about how they worked to promote and maintain children's health. I realised that the students had developed a rich fund of knowledge. Much of this book draws on the rich fund of knowledge and the unique wealth of experience that have been developed by practitioners.

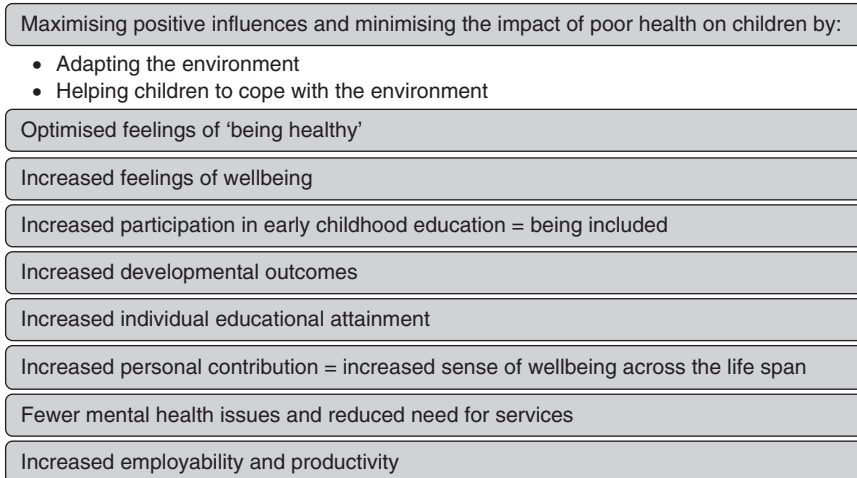
An aim of this book is to examine the inter-relationship of health and children's wellbeing. So far, it is apparent that definitions of health and wellbeing are difficult to apply in a way that is helpful to young children. I am reminded of Janet Moyles' (2010) thoughts on defining play – she used the analogy of bubbles to explain how just when we think we are clear about a definition, changes occur which affect our

understanding and thinking. In a similar way, I think that the same analogy can be applied to defining health and wellbeing. When we consider children's health and wellbeing, it can be even more complex to define.

### The link between health and wellbeing

The part of the WHO definition that states that health is a *positive concept emphasising social and personal resources*, suggests that there is a link between health and emotional wellbeing (WHO 1986). This part of the definition can be interpreted as meaning that our emotional wellbeing is reliant on our social interaction with others. In addition, it suggests that emotional wellbeing is linked to our relationship with ourselves. Therefore, this highlights the importance of developing self-reliance and resilience in young children, so that they develop good wellbeing and improve their mental health (this area is addressed further in Chapter 6).

There is a strong case for you to be equipped to fulfil your role in supporting children's health and wellbeing because there are influences that are potentially beneficial not just to the individual, but to all of society. Figure 1.1 summarises the rationale for addressing children's health and how this can reduce the need for access to health services.



**Figure 1.1** Rationale for supporting children's health and wellbeing in the early years

### Determinants of health

A determinant of health is defined as a factor that influences health. The World Health Organization (2015a, p. 1) states that

many factors affect the health of individuals and communities. Whether people are healthy or not, is determined by their circumstances and environment. To a large extent, factors such as where we live, the state of the environment,

genetics, our income and education level, and our relationships with friends and family all have considerable impacts on health.

The following sections explore the determinants of health (influences on health) within various systems.

### Bronfenbrenner's ecological systems and children's health in early years settings

Bronfenbrenner's ecological systems theory (1979) is useful for consideration of the influences of different contexts on children's health. In McDowall Clark's (2013) adaptation of Bronfenbrenner's systems in relation to children in the early years, she points out that children have two microsystems – that of their home and that of their early years setting. Figure 1.2 defines the layers in relation to early years settings.

#### Chronosystem

The chronosystem is the historical events that have shaped the changes in relation to children's health. Such changes include societal and medical advances. Knowing

#### Chronosystem

The long-term context of historical changes which impact on social factors at all levels.

#### Macrosystem

The broader context of social structures, political ideology, economic forces and wider value and belief system.

#### Exosystem

The localised context or community within which micro- and meso-systems exist.

#### Mesosystems

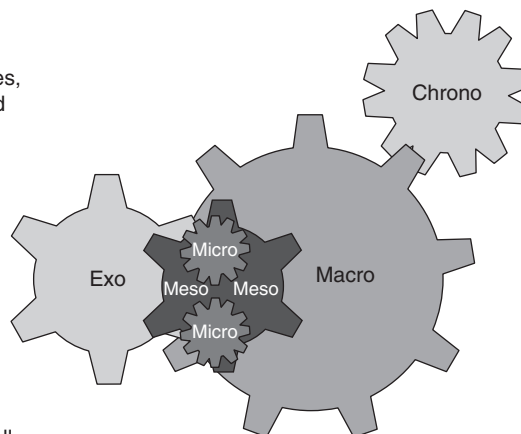
The interaction and communication between the child's various microsystems.

#### Microsystem – family

The child's immediate context where all their first experiences are mediated. The microsystem is impacted on by all the surrounding levels, e.g. local and national.

#### Microsystem – the setting

Nowadays, most children spend a large proportion of their time within different settings which form a major site of socialisation.



**Figure 1.2** Bronfenbrenner's ecological systems and children's health in early years settings as adapted by McDowall Clark (2013)

the historical context of children's health helps us to understand the contemporary issues relating to children's health, as discussed in Chapter 2.

### **Macrosystem: national influences and global perspectives**

The macrosystem in relation to children's health can be regarded as encompassing national influences such as legislation and policy. However, it is also important that the macrosystem embraces global influences on children's health. This is especially important at a time when many children are migrating from their country of origin, bringing with them their culture, religion and ethnic diversity, all of which can be an influence on all aspects of health. The level of deprivation and poverty experienced by children and their families remains a negative influence on health. Conversely, the higher the socio-economic status of children and their families, the better their health outcomes are likely to be. Therefore, as Figure 1.1 shows, there is a benefit for governments in promoting positive health and wellbeing in children.

#### *National influences*

An aim of children's health policy is to reduce inequalities in health so that all children reach their full developmental potential in childhood and across the lifespan. Marmot (2010) pointed out that the health inequalities are caused as a consequence of children living in poverty in the UK. His report informed changes to legislation aimed at reducing the disadvantages caused by poverty to children's health. Legislation and policy are discussed in Chapter 3 where the aims of global and current government policy are examined. This encourages you to critique government policy and reflect on whose voices are heard within legislation. The chapter discusses your role in developing policies in your settings that are meaningful for children, their health condition and their families.

#### *Global perspective on children's health*

Within the macrosystem, it is important to highlight some of the global health issues that can influence children's health and that, in turn, may have implications for practice. The country that a child is born in has an important influence on their health. Therefore, it is important for us to examine children's health from a global perspective so that we can appreciate that there are stark differences in the standard of children's health in some areas of the world. As previously stated, we need to understand how the child's environment influences their health status. Children living in poor countries of the world have a higher chance of dying before their 5th birthday than children in developed countries. Some of the reasons why this is so, are similar to those for the UK in the 1800s. Children who live in countries that do not have the infrastructure to provide safe drinking water and to support sanitation are more likely to come into contact with infectious diseases. In a world where immigration and migration result in many children moving between countries and cultures, we need to appreciate, as professionals, the context within which children's understanding of their world is shaped by their environment. Therefore, throughout this book consideration will be given to the influences on health that have implications for your practice.



### **Exosystem: working with other professionals and the local community**

The influence of the local community is a powerful determinant of health. If your setting is in an area of deprivation, it is likely that there will be a higher number of people living in poverty and, consequently, more children are likely to have health problems and poor social and emotional development. Areas that are home to people from diverse communities bring with them their associated health beliefs and behaviours, all of which can bring challenges and, in turn, present implications for practice. To some extent, the kind of setting that you are working in will influence the services that are available for you to access. Consequently, you may have extensive or limited contact with the professionals involved with children's health. For example, a privately owned setting may have limited contact with a child's health visitor. On the other hand, the staff of a Children's Centre may work closely together to support children's health. Therefore, it is important that you understand the socio-economic factors and the ethnic diversity of your neighbourhood, in order to be able to anticipate the likely health needs. In turn, this information can help you to plan how to address the health needs that are likely to be issues for the children and their families. Furthermore, this information can help you to understand the services and professionals that are available to meet such needs. (The need for collaborative and integrated working is discussed in Chapter 4.)

### **Mesosystem: working with parents**

The role of parents is located in the mesosystem and your role in working with parents (or carers) is critical to making links between the two microsystems of children. Crucial to this role will be communication between parents and you about the health issues affecting the children. This may be around the management of an individual child's health condition, or it may be about a health promotion initiative, such as healthy eating, in your setting.

Some of the information that is communicated by parents to you may be as a consequence of advice from healthcare professionals. This may add another layer of complexity to your relationship with parents, especially if the parents hold religious or cultural beliefs that conflict with your beliefs. (How you can support parents is discussed further in Chapter 5.)

### **Microsystem: the role of the practitioner in promoting and maintaining children's health**

As McDowall Clark (2013) has pointed out, more children now are in a second microsystem in out-of-home day-care settings for many hours each day. The hours a child spends in your setting may be equal to those spent at home. However, the need to support children's health and wellbeing remains in place and becomes your responsibility to fulfil during the time the child is with you. Your role in supporting children's health is challenging. It is likely that you will have children in your setting who are regarded as having multiple disadvantages which may exacerbate their health issues. Therefore, the content of this book encourages you to consider your role in the broadest sense. The content will challenge you to consider the knowledge you already hold and help you to identify the knowledge that you may need to acquire in order to equip yourself to carry out your role.

### Theory into practice: bringing it all together

At this point, it may be useful to start thinking about how Bronfenbrenner's ecological systems theory can help you to consider the influences on the health and wellbeing of the children in your setting.

#### CASE STUDY 1.1

Stargazers Children's Centre, Moonbeam day-care setting and Sunfield Primary School all share a site in an inner-city area of a large city. The area of the city in which the settings are situated is bordered by three very different neighbourhoods. Very close to the site, there is an affluent suburb that is situated en route to the city centre. Over a main road from the site, there is a council estate that has benefitted from investment and regeneration programmes in recent years. Next to the site of the settings are several streets that have small, dilapidated terraced houses.

The different types of housing are home to a diverse range of children and families:

- 1 Think of the different sorts of families that you are likely to encounter in all three settings. What are the 'determinants' of (factors that can impact) children's health?
- 2 Thinking of the different sorts of children and families that attend your setting, what are the relevant determinants of health that need to be considered?
- 3 List examples of some of the health and wellbeing issues that may affect the children in the setting, and make suggestions for how these might be tackled.

### Conclusion

This chapter outlined your responsibility in supporting children's health. In order to carry this out, it is important that you recognise the specific conditions affecting the children in your setting, as well as understanding the ways that those conditions can impact on children's development and early education. Part of your responsibility in supporting children's health is to fully grasp the determinants that affect the children (and their families) in your setting.

### Further reading

Blair, M. and Barlow, J. (2012) Chapter 6: Life Stage – Early Years in the Chief Medical Officer's Annual Report: Our children deserve better. Available at: [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/252656/33571\\_2901304\\_CMO\\_Chapter\\_6.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/252656/33571_2901304_CMO_Chapter_6.pdf) (accessed 23 July 2016).

Hall, D. and Elliman, D. (2006) *Health for All Children* (4th edn). Oxford: Oxford University Press.