

Early years: reducing health inequalities, what works?

This briefing for London boroughs and NHS outlines the important role of Early Years provision in reducing health inequalities, and highlights examples and characteristics of successful interventions.

Key points:

- Spending on effective early years (i.e. prenatal to five) interventions delivers greater return on investment than most other public programmes.
- Current UK spend on early years is comparatively low and is associated with poor outcomes for children, hence early years funding needs to be prioritised.
- Evidence shows protecting/consolidating investment in 'what works' and disinvesting from ineffective activities should yield cashable benefits.

Why are Early Years so important?

“Advantages accumulate; so do disadvantages”
(Heckman)

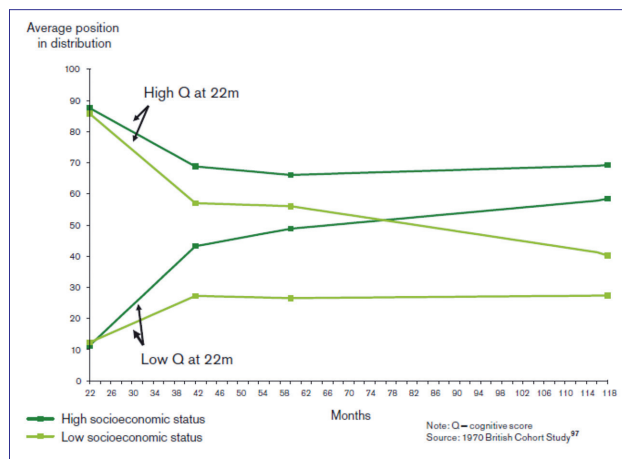
1. They determine the life chances of every child.

- The foundations of virtually every aspect of development – physical, intellectual and emotional – are established early in a child's life; conversely, so are aspects of lifetime dysfunction.
- A boy born today in Tottenham Green, Haringey, can expect to die at the age of 71, seventeen years before a counterpart born in Queen's Gate, Kensington and Chelsea.
- Negative experiences, such as substance misuse during pregnancy, or extreme childhood neglect, lead to poor neurodevelopmental outcomes, some of which may be impossible to compensate for, even via later intervention (McCain and Mustard, 1999).
- Conversely, positive experiences, such as frequent mother-child interactions and high quality nutrition such as breastfeeding, have demonstrated improved neurodevelopmental and cognitive outcomes for children (Gutman and Feinstein, 2007, Treyvaud et al., 2009).

2. Investing early reduces health inequalities

- Interventions do not necessarily have to be health specific in order to have a positive impact on health inequalities.
- Programmes that improve learning abilities, behaviour and parental relationships early in childhood provide life-long benefits and can help to break the cycle of poverty and inequality.
- The gaps in cognitive and non-cognitive skills between children of different socio-economic groups have been demonstrated to emerge early and persist into adulthood (Carneiro and Heckman, 2003). This is illustrated in the following graph.

Inequality in early cognitive development of children in the 1970 British Cohort Study, at ages 22 months to 10 years



- The National Child Development study demonstrated how the home environment contributes to these skills and how this matters for future school achievement, likelihood of teenage pregnancy, involvement with crime and employment prospects (1958 cohort; Carneiro, Crawford and Goodman, 2006).
- Children raised in disadvantaged environments are less likely to succeed in school, in economic and social life, and are less likely to grow into healthy adults.

3. Early years interventions will save local authorities and health services money in the long term

- As well as the impact on individuals, health inequalities have a significant financial cost. Professor Sir Michael Marmot, who led the review of Health Inequalities in England, estimated that inequality in illness costs each year:
 - £31-33 billion in productivity losses
 - £20-32 billion in lost taxes and higher welfare costs
- - £5.5 billion additional NHS healthcare costs
- A number of reviews which evaluate the costs and benefits of early childhood interventions (primarily in the US) show a return of between \$1.26 to \$17.07 for each dollar invested.

What interventions does evidence show to be most effective?

Results from the analysis based on US studies show that some home visiting and pre-school programmes are particularly effective, especially for disadvantaged groups. For more detail please see the full report of the economic case for investment.

Specific interventions

- Two examples of highly effective programmes are:
 - Nurse Family Partnerships (NFP) provide intensive support during pregnancy and the first two years after birth for low-income, 'at risk' first time mothers. The programme aims to promote a child's development and develop parents' parenting skills
 - Early childhood education for low income 3 and 4 year olds are pre-school initiatives to make children 'school ready'.
- For more detail and further examples of effective interventions and cost analysis, please see Appendix D of the economic case for investment.

Critical success factors in cost-effective early years interventions

- Characteristics of early years interventions which provide high returns on investment are:
 - High quality in terms of the environments used and the level of staff training;
 - Clearly targeted at disadvantaged groups who are most at risk of poor outcomes and for whom the model is known to be effective;
 - Delivered with a high level of fidelity to the original model.
- Conversely, evidence shows interventions which lack these characteristics are less effective and poor value for money. Investment in interventions with these characteristics should therefore be avoided. See Appendix C of the economic case for investment.

How does this fit with the current political and financial context?

- This agenda is supported by the Coalition Government's £2bn grant allocated for early intervention which was announced as part of the CSR.
- This is also supported by the government's commitment to doubling the 6,000 families in England who have already benefited from Nurse Family Partnerships by 2015.
- Early years is also integral to the current Government reviews on the Early Years Foundation Stage (Dame Claire Tickell), Early Intervention (Graham Allen MP) and Poverty and Life Chances (Rt Hon Frank Field MP).

Please see overleaf for recommended next steps

What are the recommended next steps to take?

1. Focus on quality and targeting support where it is most effective

- Early years interventions delivered in quality settings, with quality staff training, are more likely to be effective.
- Similarly, evidence from the programmes such as NFP (now being positively evaluated in the UK as Family Nurse Partnerships) demonstrates that effectiveness increases the more support is targeted at families with the greatest risk of poor outcomes.

2. Ensure success factors are reflected in commissioning processes

- Use what works in early years as the cornerstone for developing and commissioning future interventions as this will enhance successful outcomes.
- Ensure there are a set of shared expectations and assumptions (between the organisation funding and the one delivering the service) about why an intervention should work 'on paper'. This will enable these assumptions to be re-visited as the intervention progresses (and before results become apparent).
- An intervention based in strong theory or logic, with the assumptions stated and anticipated, has a greater chance of continuing to deliver successful outcomes in the event of wider changes.
- It is also valuable to consider evaluating significant early interventions to increase understanding of which specific aspects are effective, and to add to the knowledge base of what works for future commissioning.

3. Share what works

- The economic case suggests that there has been historic under-investment in early years, partly because the benefits of investing early accrue to many different partners, such as local authorities, the NHS and the police, over a long time period.
- It benefits everyone to invest in early years. Approaches such as Total Place can make it easier to pool investment and work towards early intervention as a common goal.
- This may overcome the challenge that arises from historical funding arrangements, with some aspects of early years funded by children's services e.g. childcare and other aspects from health e.g. health visiting services.

Please see the full report at

<http://www.london.gov.uk/who-runs-london/mayor/publication/early-years-interventions-economic-case> for references.