

There is a strong case for intervention in the early years to reduce health inequalities. The report recommendations are based on which evidence-based, early years programmes are likely to produce the best outcomes for reducing health inequalities in London.

The early years are the most critical time for all aspects of a child's development. However, due to the incentives to different stakeholders and the long timeframes over which benefits accrue there is an under-investment in early years by both individuals and government.

Evidence shows that many early intervention programmes can provide good returns on investment. However, there are some interventions where the costs outweigh the benefits. There is limited UK evaluation evidence available, so evidence from the US has had to be used; evidence which may not be directly applicable in the UK.

The US and the UK differ structurally in a number of respects and it is a significant assumption to assume that the size of the impact from different interventions would be the same in the two countries. Beyond the scope of the

WSIPP report, there may be other types of studies that are relevant for health inequalities in London for which robust evaluation evidence is not yet available.

This report is intended to give some indicative analysis as to the relative effectiveness of programmes rather than providing a robust London-specific cost benefit analysis. It is anticipated that further work by Dartington Social Research Unit with a number of English cities (including London through the GLA and ALDCS) in 2011 will provide a sustainable and robust, UK-specific cost benefit model to enable the application of tried and tested US programmes to a UK context.

By re-running the WSIPP work with London values a slightly different relative ranking between programmes is achieved which might be useful when considering what programmes are likely to be best value and most effective in London.

The summary box below identifies some of the key findings from this analysis (see also Appendix D).

Summary of lessons learned

- Programmes that are targeted at populations who are most likely to benefit from the interventions are likely to yield the greatest benefits.
- Quality of service provision is important, particularly for childcare.
- Programmes that involve parents, the community and direct interaction with the child appear to have the greatest success.
- Practitioners should be accessible, approachable and responsive; as well as culturally sensitive.
- Intensive, behavioural-based programmes appear to have good results.
- Universal services, particularly those linked to health services, are non-stigmatising and can be used to identify at-risk individuals and refer them to more specialised services.
- Robust evaluation is necessary to assess what is effective.

Suggested programmes for further implementation

On the balance of all of the evidence the following programmes are likely to be effective if implemented or extended further in the UK:

- Pre-natal and post-natal care programmes such as Nurse Family Partnerships.
- Pre-school programmes such as the Perry Preschool Programme.
- Follow-on programmes should supplement these interventions during primary and secondary school.

Evaluation evidence suggests that public sector interventions can be effective and provide very high returns to society as a whole. In particular, programmes implemented in the critical pre-natal, post-natal and pre-school periods can have very high returns. It is recommended that investment in these programmes be increased relative to other areas. To do this, it may be necessary to address obstacles to investment by changing the incentives or framework within which funding for early years interventions are provided.

On the balance of all of the evidence, the following programmes are likely to be effective if implemented, continued or extended further in London: home visiting programmes for at-risk mothers and children such as Nurse Family Partnerships and early childhood education targeted towards low income 3 and 4 year olds. The latter is consistent with the existing and continuing universal entitlement of 15 hours free early education per week for all 3 and 4 year olds⁶⁴

When implementing early years interventions, the quality of service provision is vitally important and benefits appear to be greatest when the programmes are targeted rather than universal. However, early years interventions are likely to need to be provided with a universal access point to enable early identification of potential developmental problems.

The scale of challenge and a growing child population in London emphasise the importance of improving child outcomes in London in the longer term. The relationship between early years and future economic and social outcomes requires the focus on early years to be maintained despite changes in structures if we are to maximise the benefits of public investment. This is critical not only for social and public policy outcomes but also for the economic success of London.

