



# The Importance of Investing in Children

Key research findings



**Caroline COSTONGS**, Director, EuroHealthNet  
*Annual Convention for Inclusive Growth*  
*27 April 2018, Brussels*

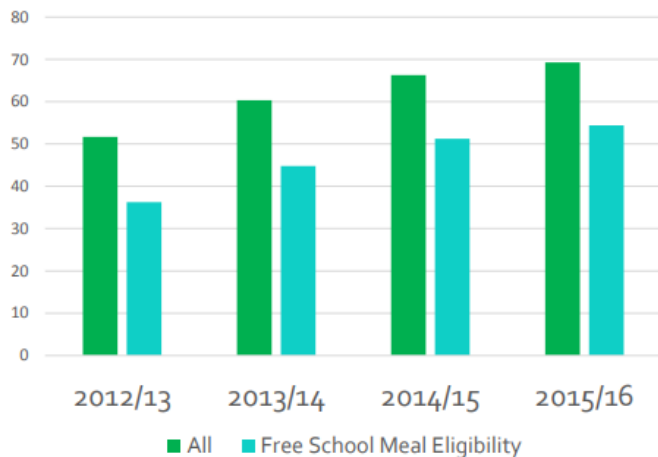




# Children's Health and Wellbeing

In all European societies, for every step down the socio-economic ladder, **children and young people** experience a higher level of physical and mental health problems that will **affect their future health and life opportunities**.

Percentage of children reaching a good level of development at age 5

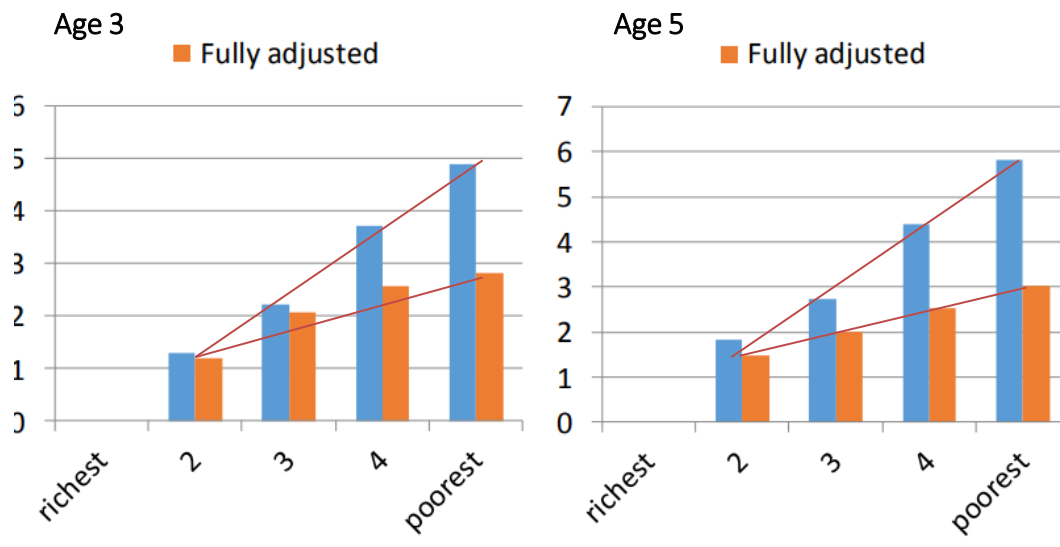




# Impact on socio-emotional behaviour

Socio-emotional difficulties at age 3 and 5:  
Millennium Cohort Study

The poorer the more socio-emotional difficulties



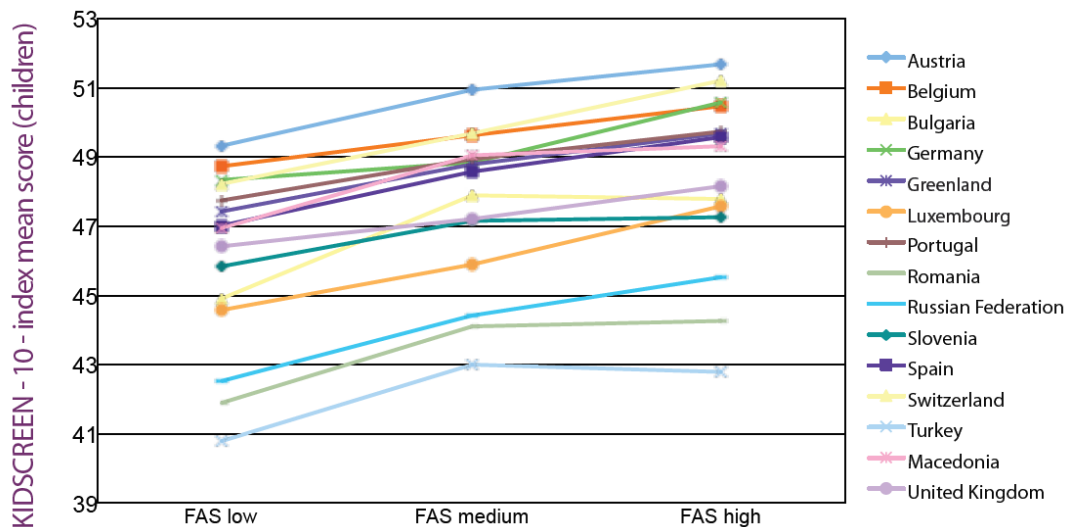
Source: Kelly et al., 2010 in DRIVERS



# Children's Health and Wellbeing

The association between family affluence and children's health and wellbeing outcomes is evident across the EU

Socio-economic differences in self-reported health



High familial affluence is significantly associated with higher health and mental wellbeing

Source: Gradient





# Children's Health and Wellbeing

Children currently represent 20 % of the population in the EU; by 2050 they will represent 15 %.

**Not achieving the full potential** in terms of mental, physical and social well-being **signify losses that EU societies cannot afford.**

Source: GRADIENT

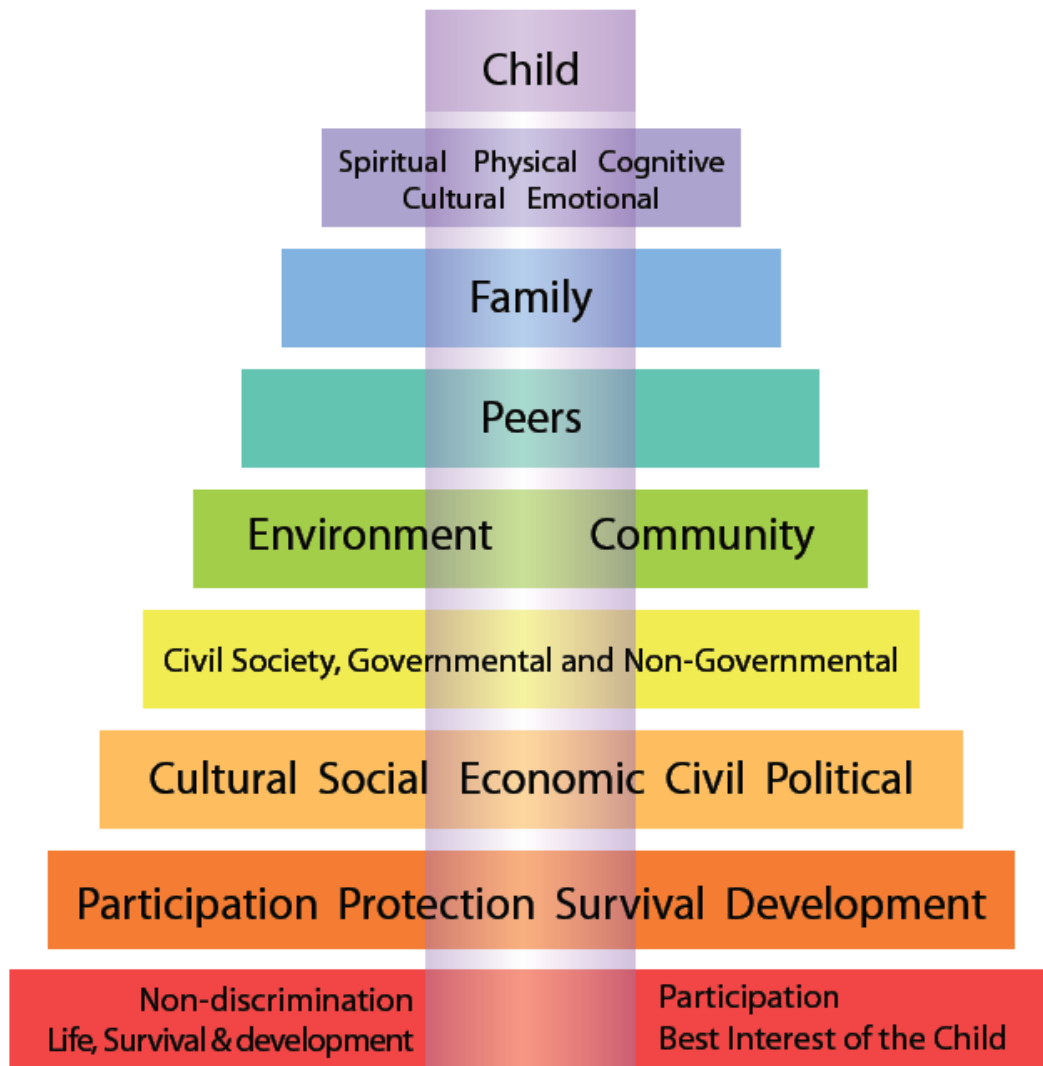


Figure: Based on the adapted child rights social ecology model (Nairn 2011)

Source: GRADIENT



# Underlying causes (from 183 studies)

parental occupational  
social class

higher parental  
job strain

neighbourhood  
deprivation

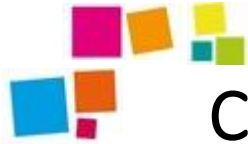
lower parental  
educational attainment

lack of housing  
tenure

household material  
deprivation

lower parental  
income/wealth

Source: DRIVERS



# Contribution of social factors to health outcomes

Health inequalities cannot be addressed by the health sector alone



Figure 1: Estimates of the contribution of the main drivers of health status

Source: [www.kingsfund.org.uk/time-to-think-differently/trends/broader-determinants-health](http://www.kingsfund.org.uk/time-to-think-differently/trends/broader-determinants-health)

We can say that, although estimates vary, a number of studies suggest that social and environmental factors account for between 40-60% of variation in health outcomes.

Source: Institute of Health Equity





# Equality versus Equity





# Equality versus Equity



‘Proportionate  
universalism’



# Equality versus Equity



‘Proportionate  
universalism’

Remove barriers,  
address root causes



# Children's Health and Wellbeing

## Overall conclusion

Universal policies are more likely to be effective in reducing socio-economic gradient in health than targeted policies, since they are **broad enough in scale to have a population-wide impact.**

But: **proportionate universalism** – according to needs

Due to the **financial constraints** that all EU member states are facing, universal services are being reduced in favour of targeted ones. **Cut in universal services are likely to hit those who are already the worst off.**

Risk: developing “poor services for the poor”



# What can be done?

## Recommendations from DRIVERS and GRADIENT



1. Early investment is long-term gain
2. Proportionate universal policies
3. “Mama working”
4. Community social capital
5. Distributional impact of policy
6. Involvement
7. Health gradient indicators in eu2020



1. Promote affordable, high-quality prenatal and early years provisions
2. Promote fair employment
3. Prioritise social protection support
4. Universal and tailored early years education
5. Identify families at risk of poor health early on





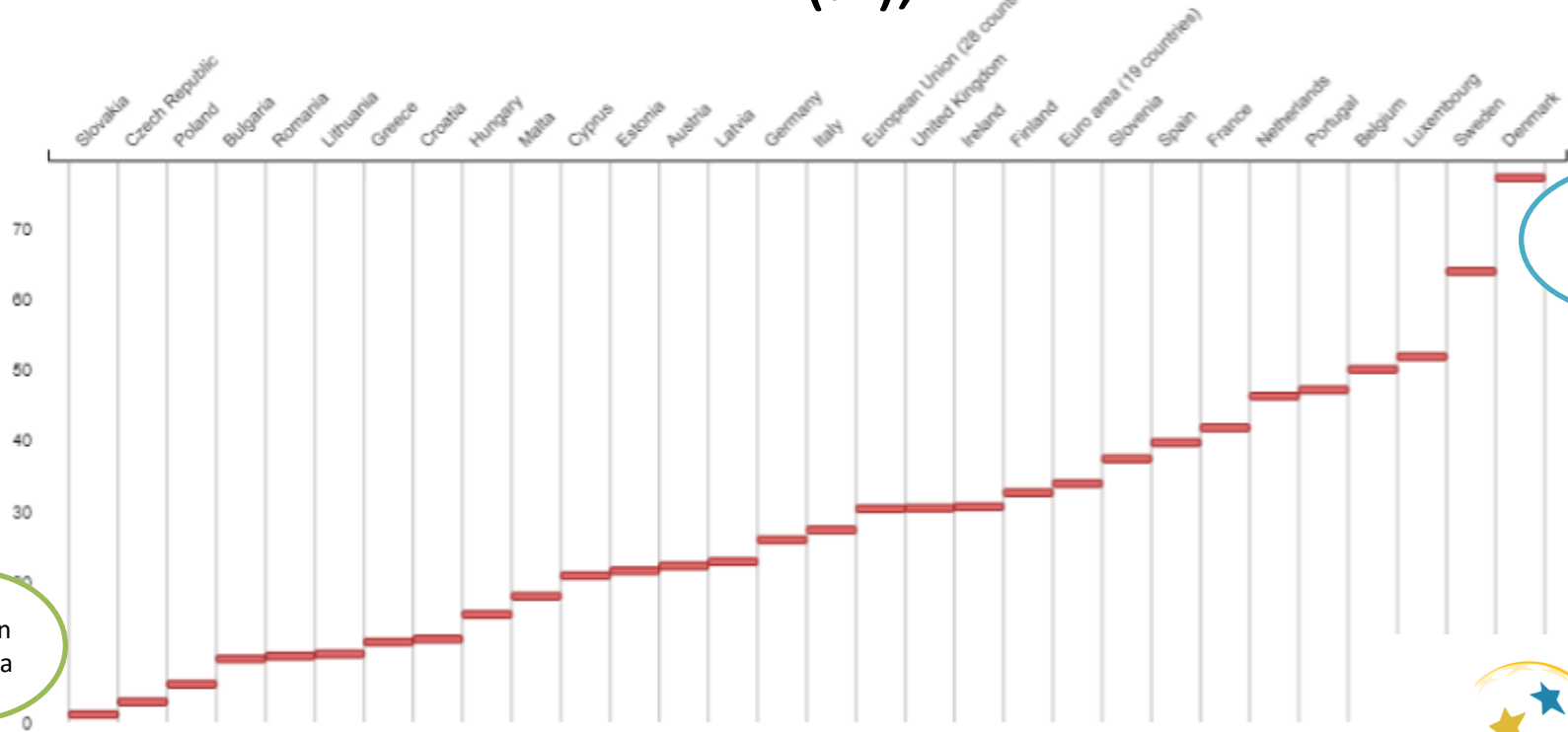
## “MAMA WORKING”

A good example of effective measures that governments can take to level-up the socio-economic gradient in health is to stimulate maternal employment, particularly amongst low-income families. Doing so can improve family earnings, while breaking dependencies on more passive forms of income redistribution, such as unemployment benefits. However, the quality of employment must be good in that it must offer job security and control, while working conditions must enable mothers to combine work and family life in a way that does not generate even more stress for them and for their children. This means that governments must pair policies to stimulate maternal employment with ones that improve the access of low-income families to day-care centres with highly trained staff, and where fees are scaled on the basis of ability to pay.





# Children aged less than 3 years in formal childcare (%), 2015

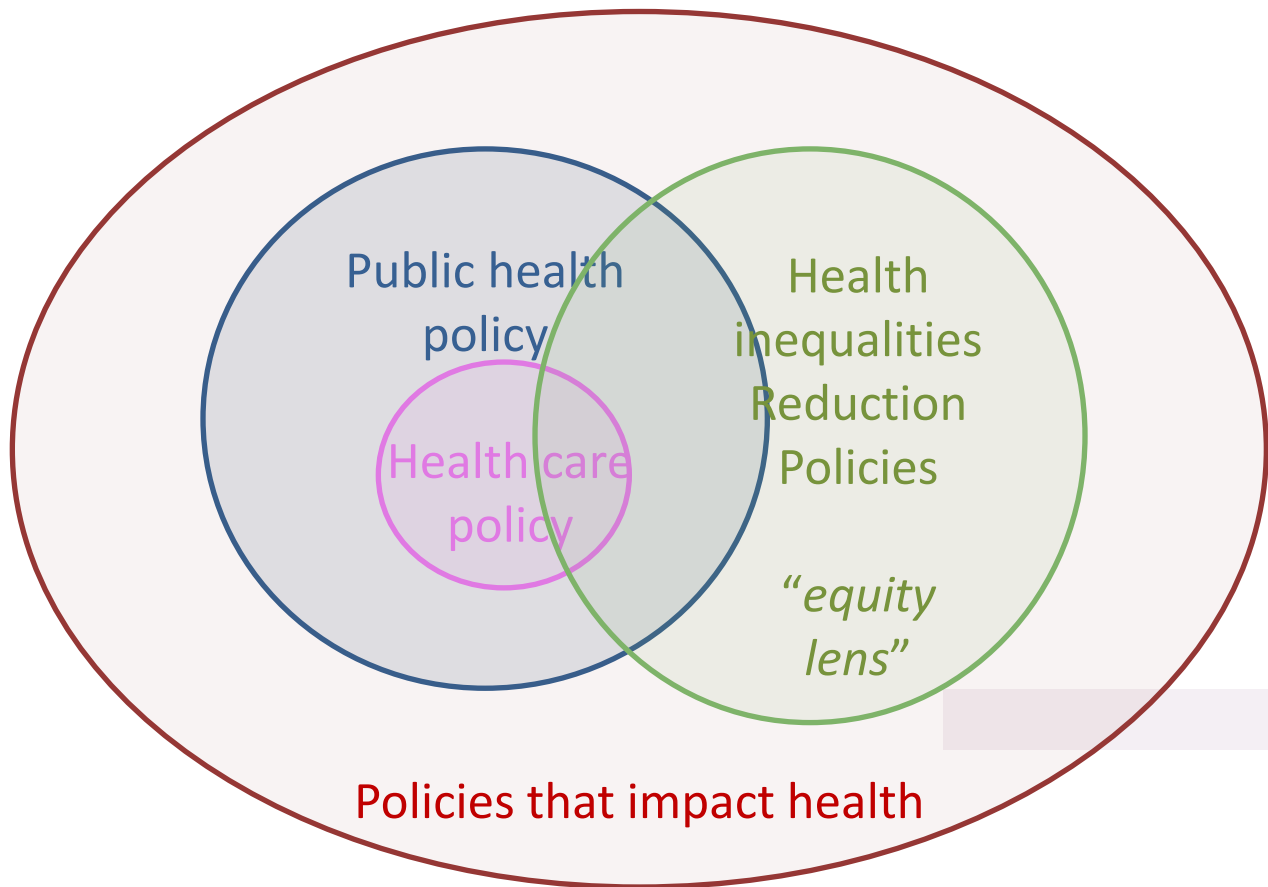


Source: the social scoreboard





# Child health equity is everybody's business







# A European Pillar to Invest in Children

The 20 Principles of the European Pillar of Social Rights

## Equal opportunities and access to the labour market

- 1 Education, training and life-long learning
- 2 Gender equality
- 3 Equal opportunity
- 4 Active support to employment
- 5 Secure and adaptable employment

## Fair working conditions

- 6 Wages
- 7 Information about employment conditions and protection in case of dismissals
- 8 Social dialogue and involvement of social partners
- 9 Work life balance
- 10 Healthy, safe and well-adapted work environment

## Social protection and inclusion

- 11 Childcare and support to children
- 12 Social Protection
- 13 Unemployment benefits
- 14 Minimum income
- 15 Old age income and pensions
- 16 Health care
- 17 Inclusion of people with disabilities
- 18 Long-term care
- 19 Housing and assistance for the homeless
- 20 Access to essential services

[www.eurohealthnet.eu](http://www.eurohealthnet.eu)