

Child poverty, adversity and health across the lifecourse

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Health Inequalities Policy Research Group (HIPR)

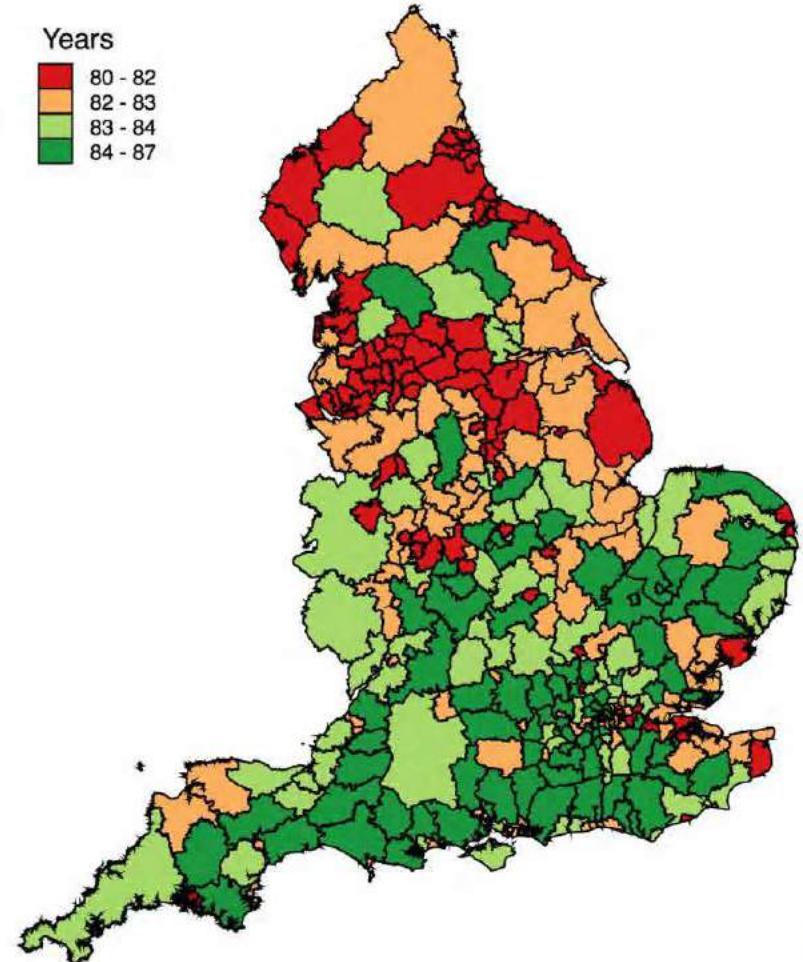
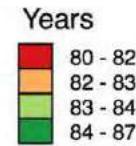
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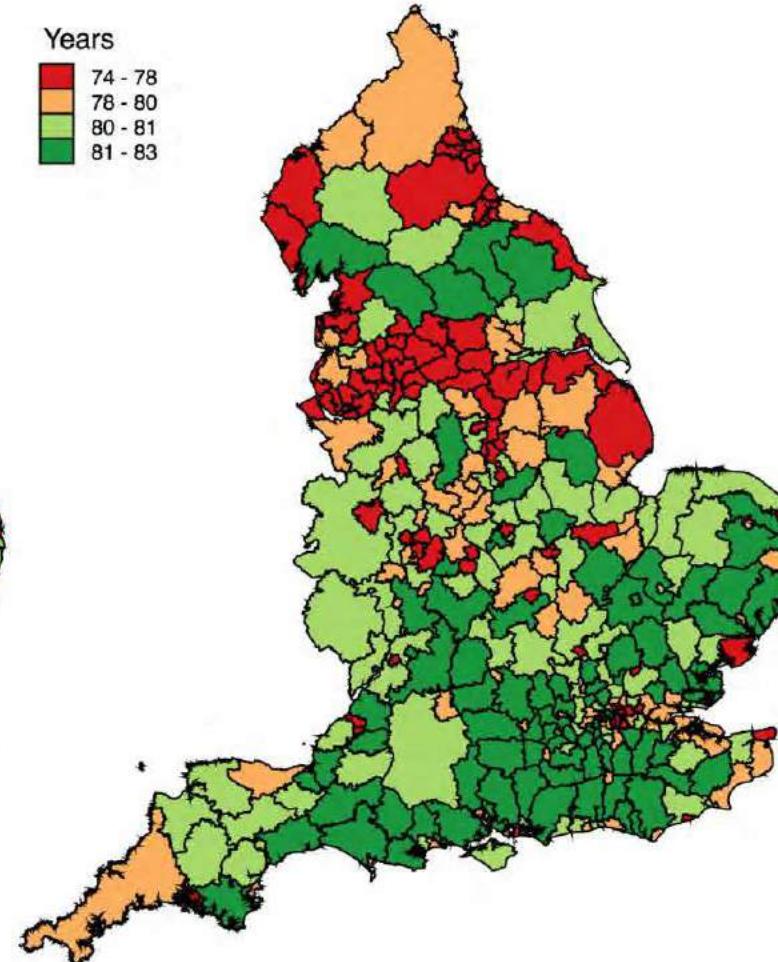
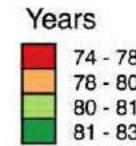
Liverpool
April 2021

Life Expectancy: the North-South Health Divide

Female



Male

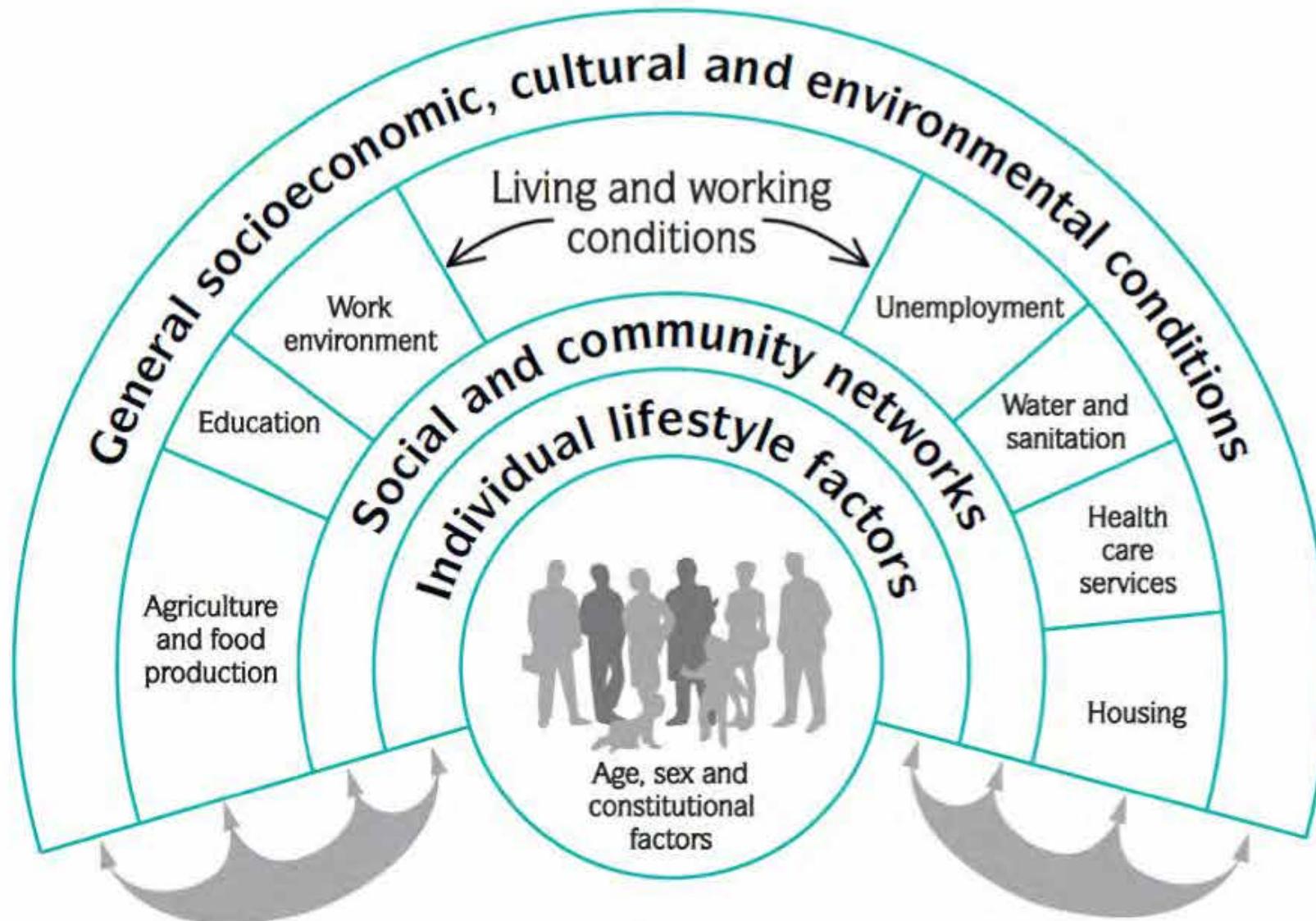


Source: Due North

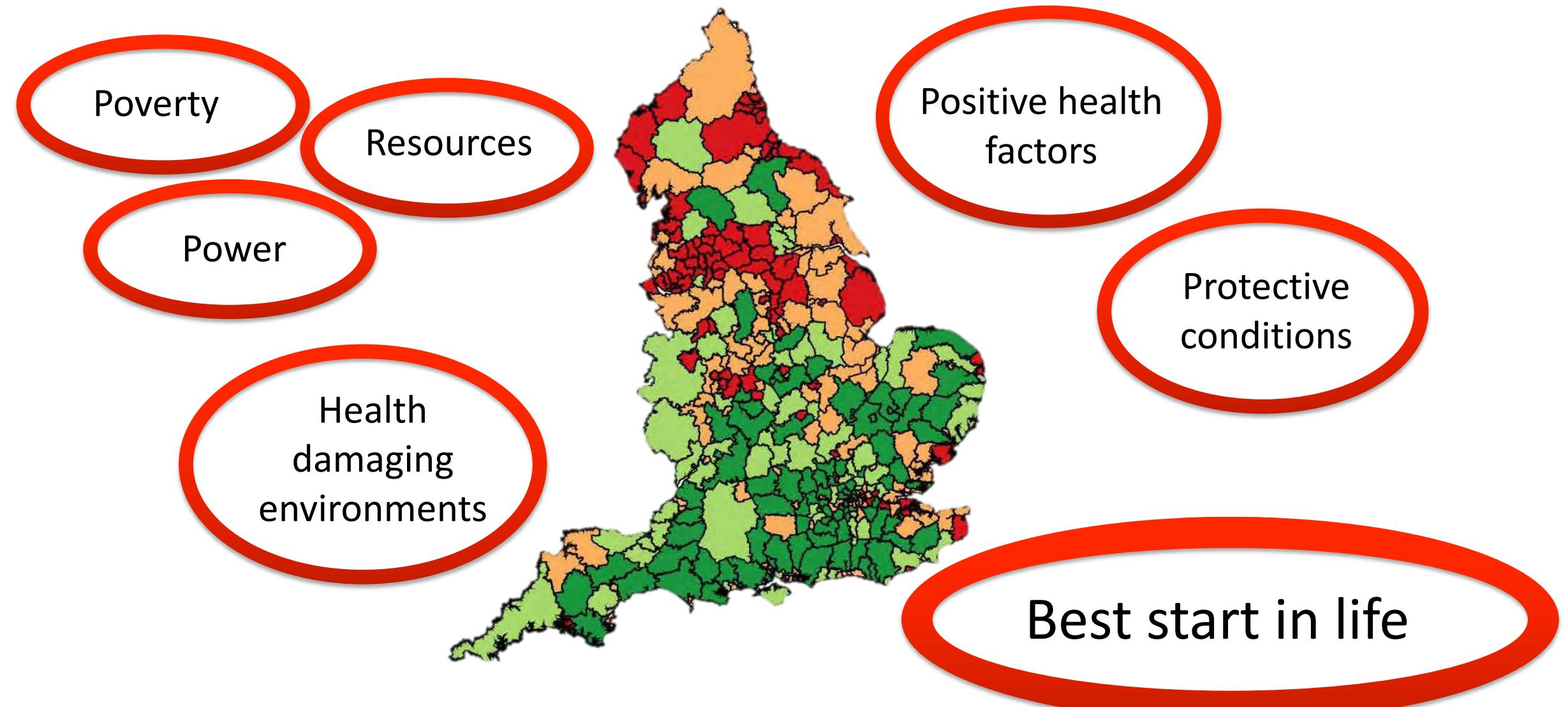




THE MAIN INFLUENCES ON HEALTH



Drivers of the inequalities in Health





Pathways to inequalities in child health

Anna Pearce,¹ Ruth Dundas,¹ Margaret Whitehead,² David Taylor-Robinson²

► Additional material is published online only. To view, please visit the journal online (<http://dx.doi.org/10.1136/archdischild-2018-314808>).

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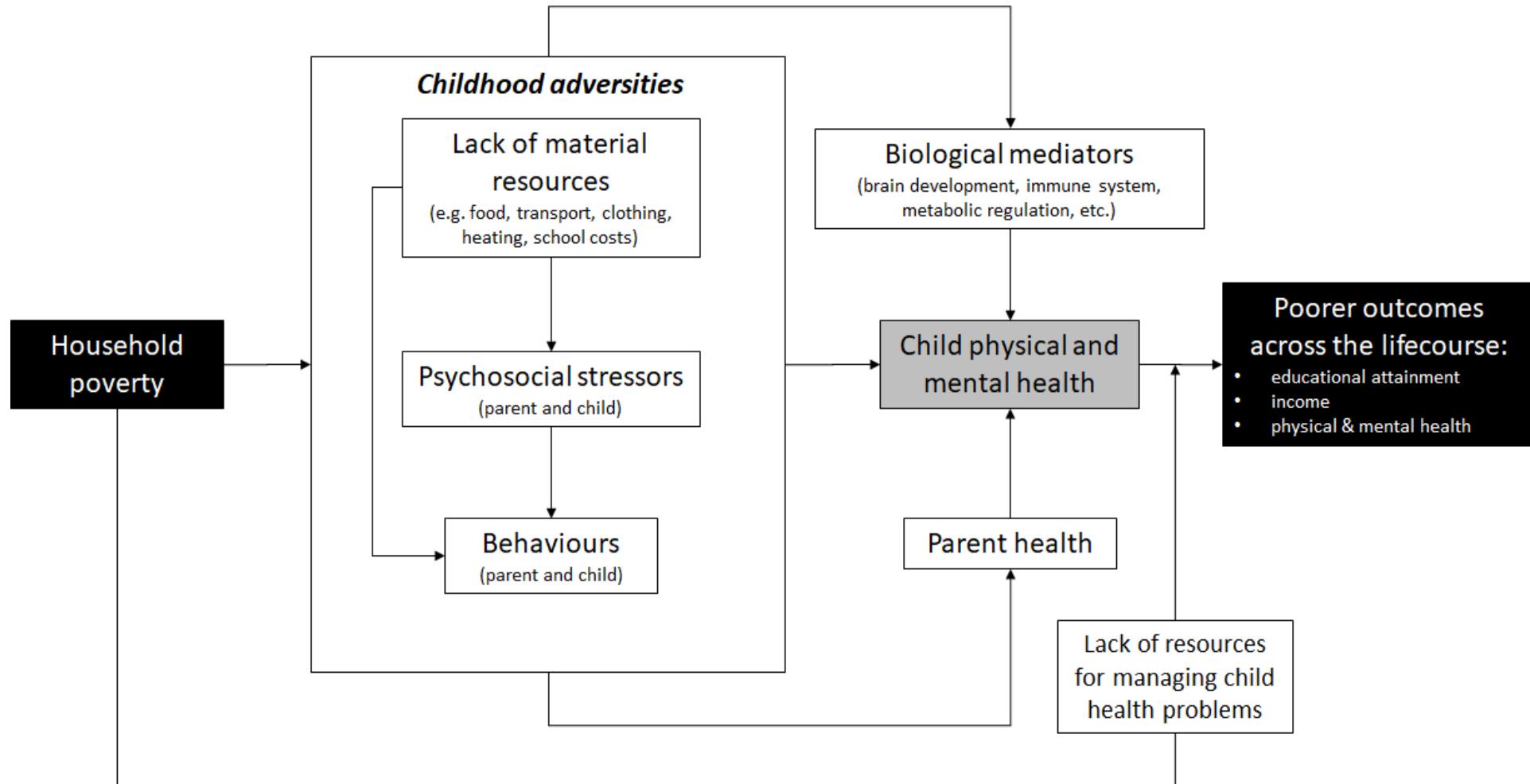
ABSTRACT

From birth, children living in disadvantaged socioeconomic circumstances (SECs) suffer from worse health than their more advantaged peers. The pathways through which SECs influence children's health are complex and inter-related, but in general are driven by differences in the distribution of power and resources that determine the economic, material and psychosocial conditions in which children grow up. A better understanding of why children from more disadvantaged backgrounds have worse health and how interventions work, for whom and in what contexts, will help to reduce

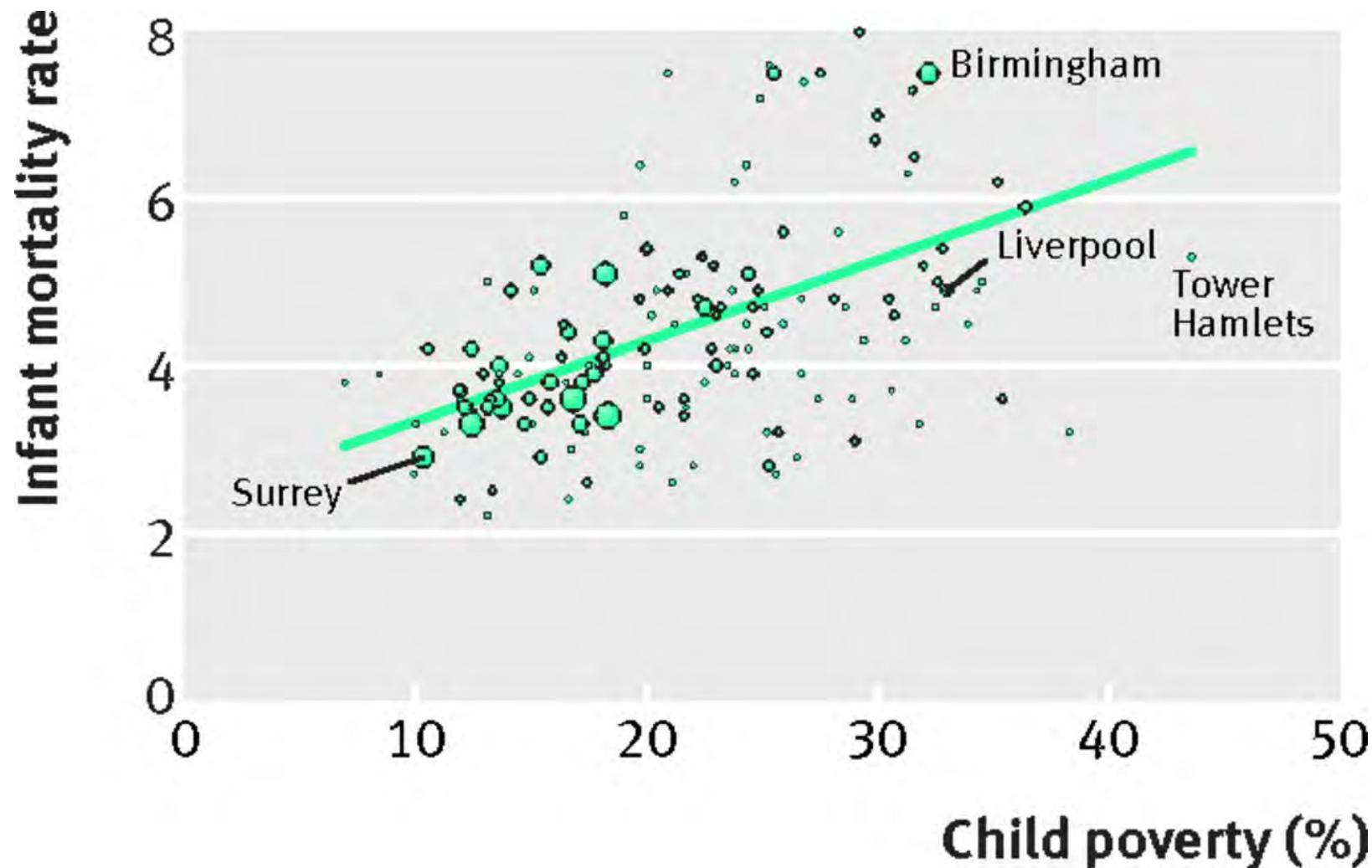
professionals with a better understanding of what might be done to alleviate these differences. We begin with a brief description of the social determinants of child health, before turning to the ways in which HIs develop, drawing on a range of key theories. We highlight the ways in which policies might support or exacerbate HIs and finish by discussing future challenges, including for health professionals.

The term *health inequity* is sometimes used to refer to HIs which are unfair and avoidable, thus differentiating them from health differences due

Pathways from household poverty during childhood to health and other impacts across the lifecourse



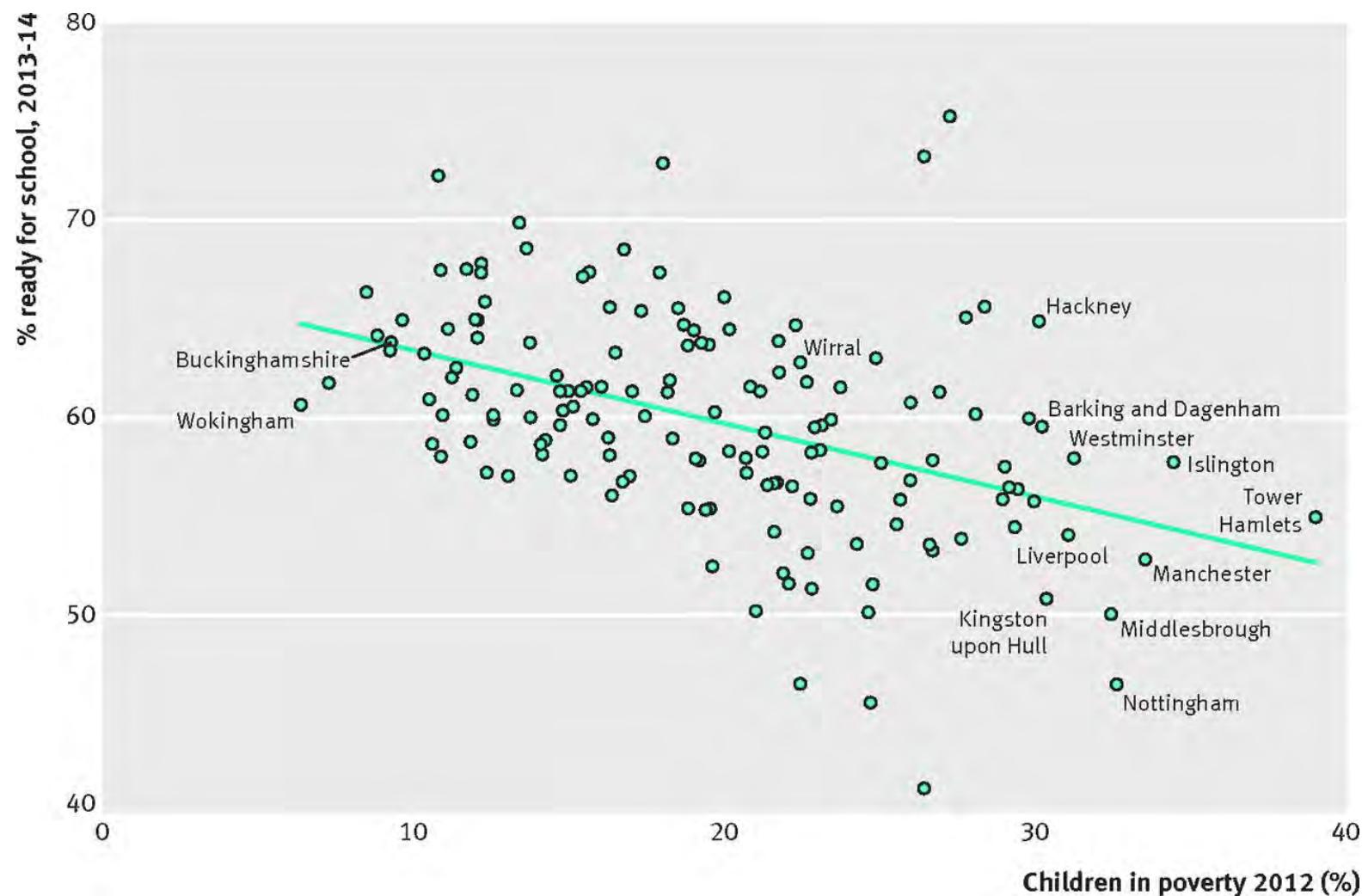
Infant mortality rate by relative child poverty (<60% median) for local authorities in England.



David Taylor-Robinson et al. BMJ 2015;351:bmj.h3959

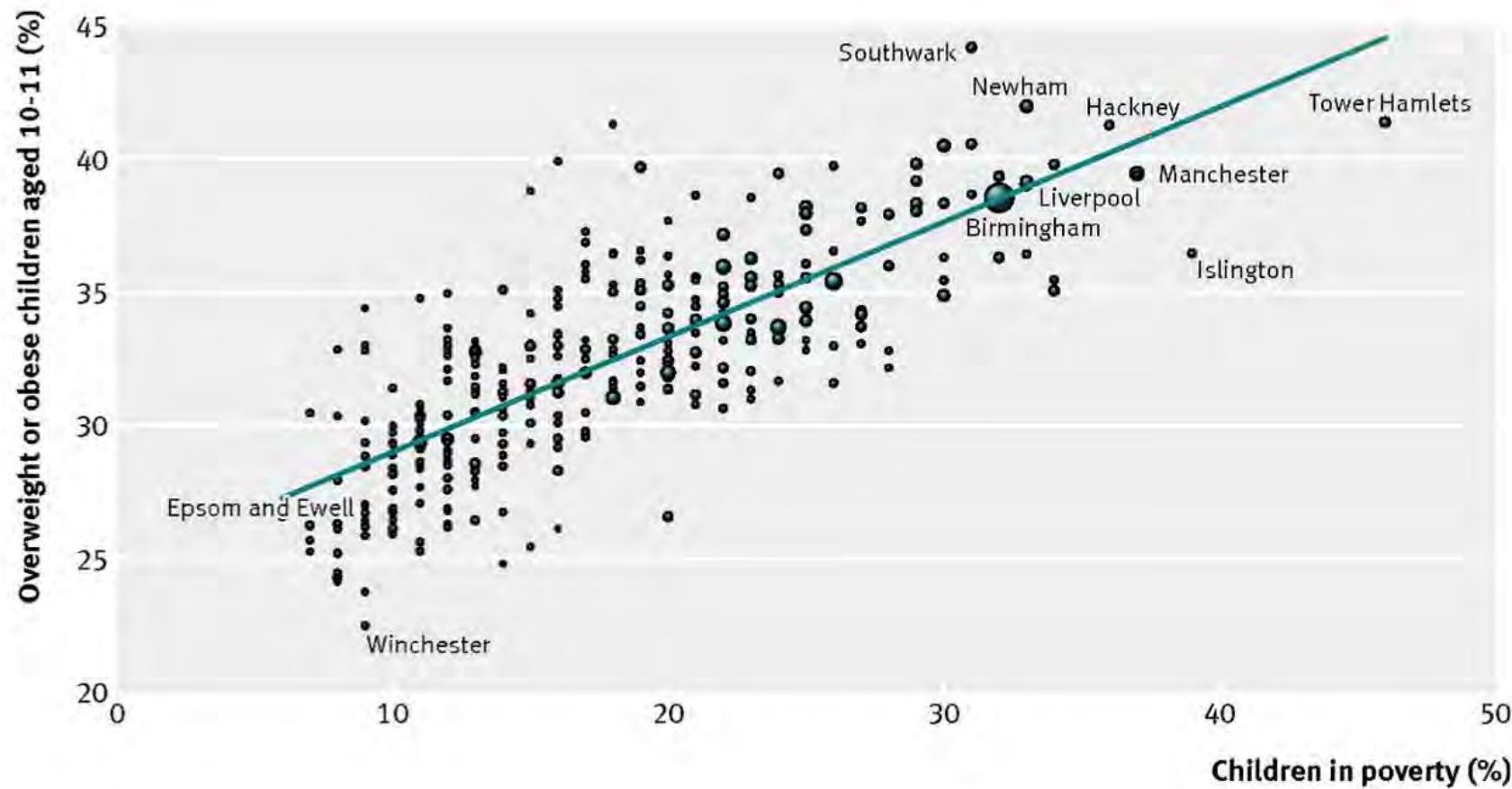


Percentage of children assessed as ready for school at age 5 (good level of development at end of early years foundation stage) compared with levels of child poverty in English authorities



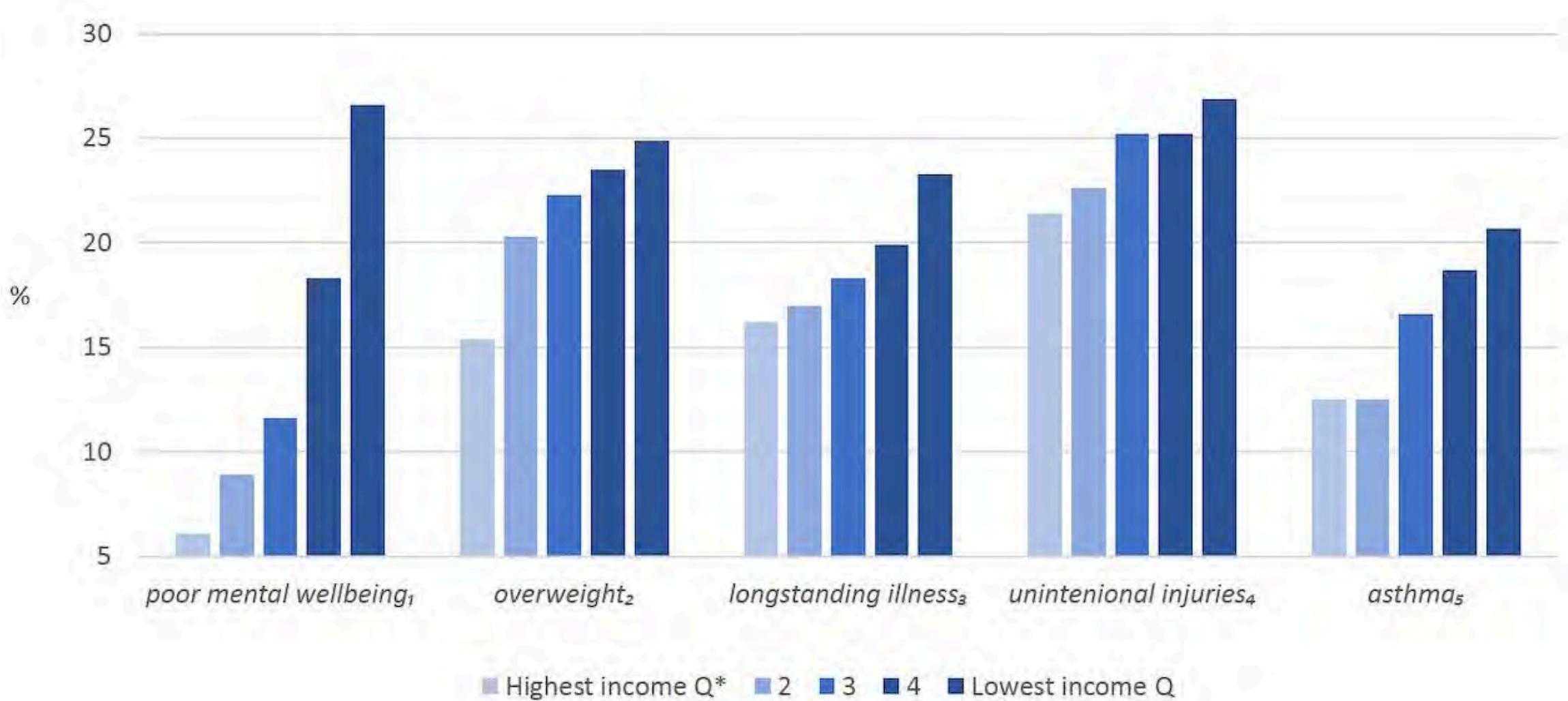
David Taylor-Robinson et al. BMJ 2015;351:bmj.h5330

Percentage of overweight or obese children aged 10-11 years by percentage of children in poverty in English councils, 2012.

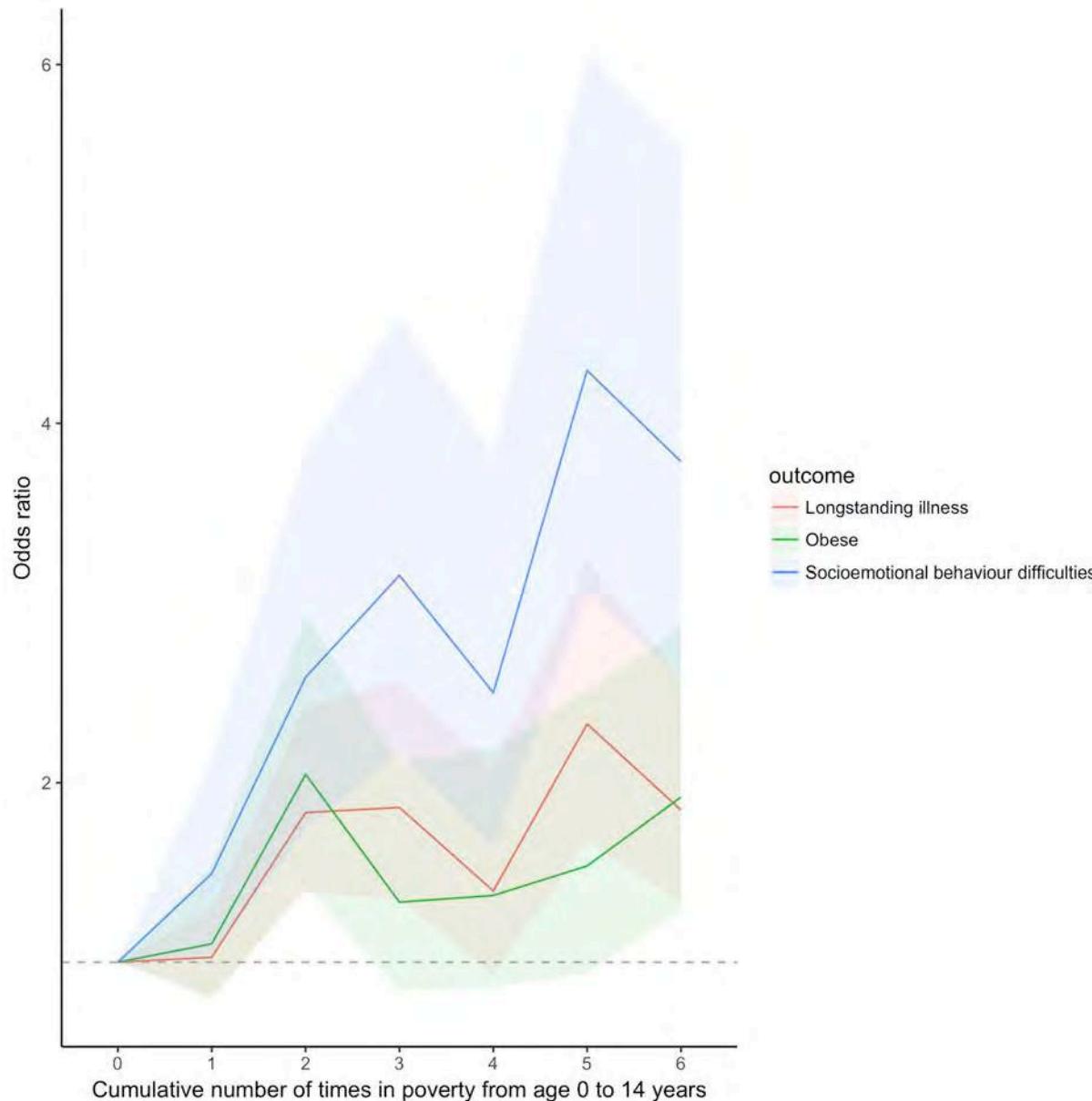


Taylor-Robinson D C et al. BMJ 2014;348:bmj.g2712

Income gradients in health outcomes at age 7 years in UK



Poverty trajectories up to age 14 in the UK and associated health outcomes: analysis of the UK Millennium Cohort Study

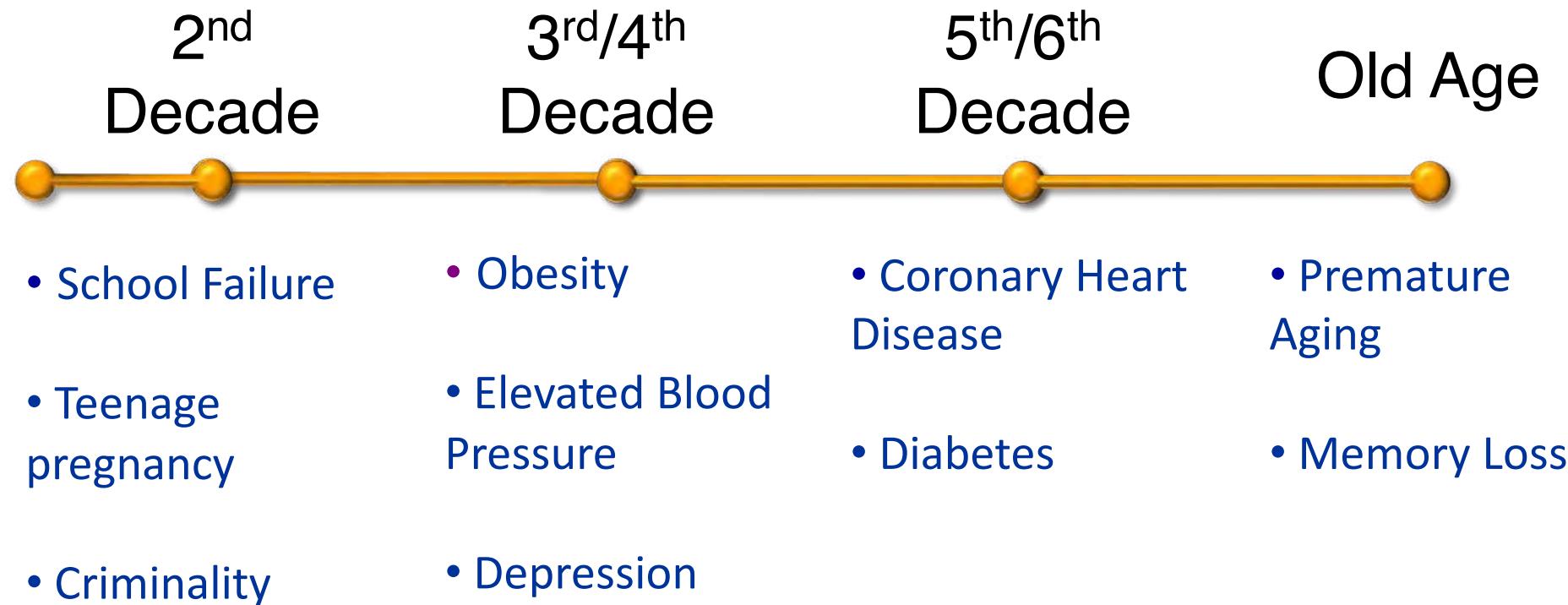


Dose response relationship with cumulative poverty exposure, especially for mental health outcomes in children in the UK

Lai et al 2019



Life Course Problems Related to Early Life





Trajectories of childhood adversity and mortality in early adulthood: a population-based cohort study



Naja H Rod, Jessica Bengtsson, Esben Budtz-Jørgensen, Clara Clipet-Jensen, David Taylor-Robinson, Anne-Marie Nybo Andersen, Nadya Dich, Andreas Rieckmann

Follow up of 1 million children born between 1980 and 1998

Dimensions of childhood adversities

Material deprivation

- Family poverty
- Parental long-term unemployment

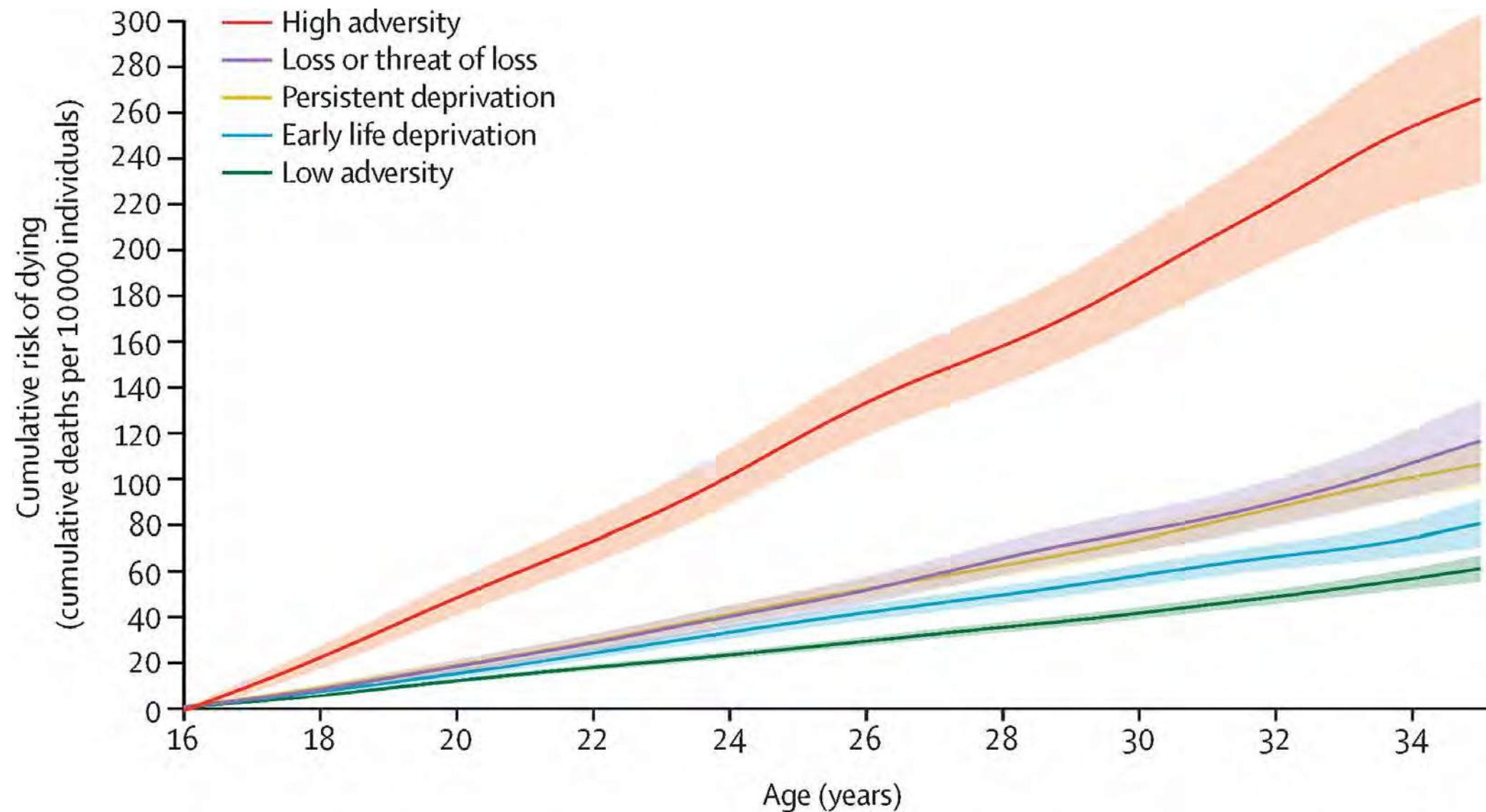
Family dynamics

- Foster care
- Parental psychiatric illness
- Sibling psychiatric illness
- Parental alcohol abuse
- Parental drug abuse
- Parental separation

Loss or threat of loss

- Death of a parent
- Death of a sibling
- Parental somatic illness
- Sibling somatic illness

Risk of dying in early adulthood by early experience of adversity



Childhood is a sensitive period

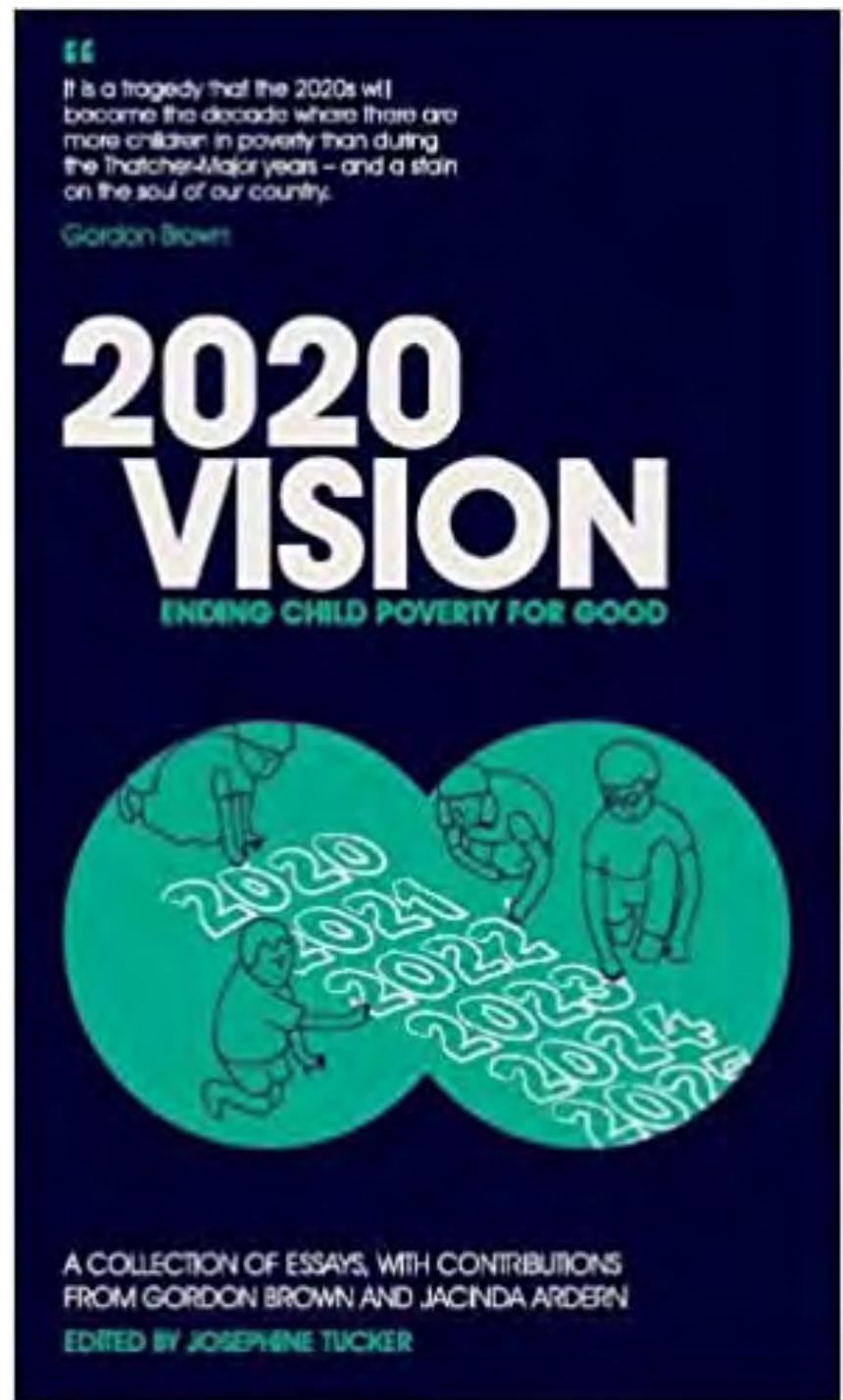
Fleeting exposure to poverty impacts health

Underlying morbidity will translate into a substantial public health problem

Worrying for the UK - stronger effects in societies with less social security

Crucial importance of broader structural public health initiatives, as well as help to identify vulnerable children who would benefit from targeted support

In 1999, Tony Blair pledged to end child poverty by 2020. This was one element of New Labour's broader inequality strategy which included the English Health Inequalities Strategy, regarded as the world's largest experiment in tackling health inequalities.



“By 2010 to **reduce by at least 10% the gap in life expectancy** between the fifth of local authorities with the worst health and deprivation indicators (the Spearhead areas) and the population as a whole”. (DH, 2003).



- Targets
- Resource allocation
- Area based regeneration
- Tax and benefit changes
- Minimum wage
- Sure Start
- Targeted primary and secondary prevention services
- Technical support for improved chronic disease management



RESEARCH

Investigating the impact of the English health inequalities strategy: time trend analysis

OPEN ACCESS

Ben Barr *senior clinical lecturer in applied public health research*, James Higgerson *research fellow*, Margaret Whitehead *WH Duncan professor of public health*

Department of Public Health and Policy, Institute of Psychology, Health and Society, University of Liverpool, Liverpool L69 3GB, UK

BMJ 2014;348:g3231 doi: 10.1136/bmj.g3231

Page 1 of 10

RESEARCH

The impact of NHS resource allocation policy on health inequalities in England 2001-11: longitudinal ecological study

OPEN ACCESS

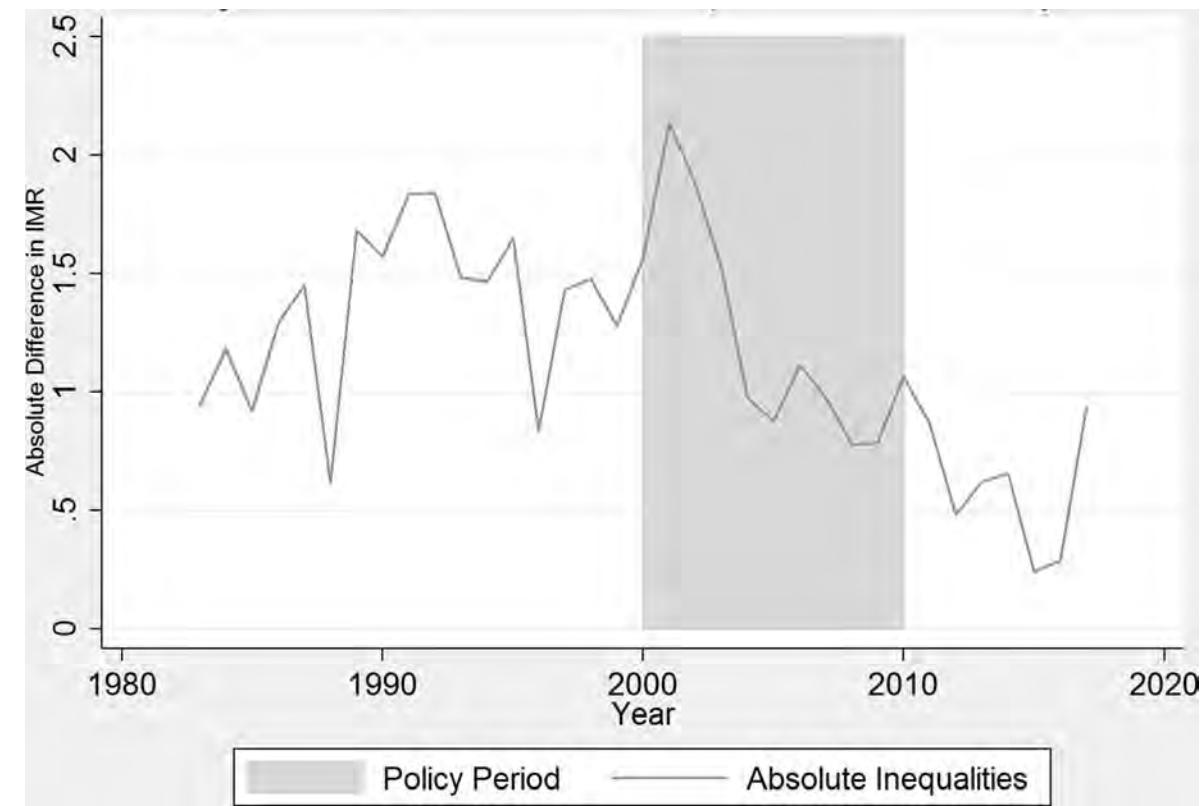
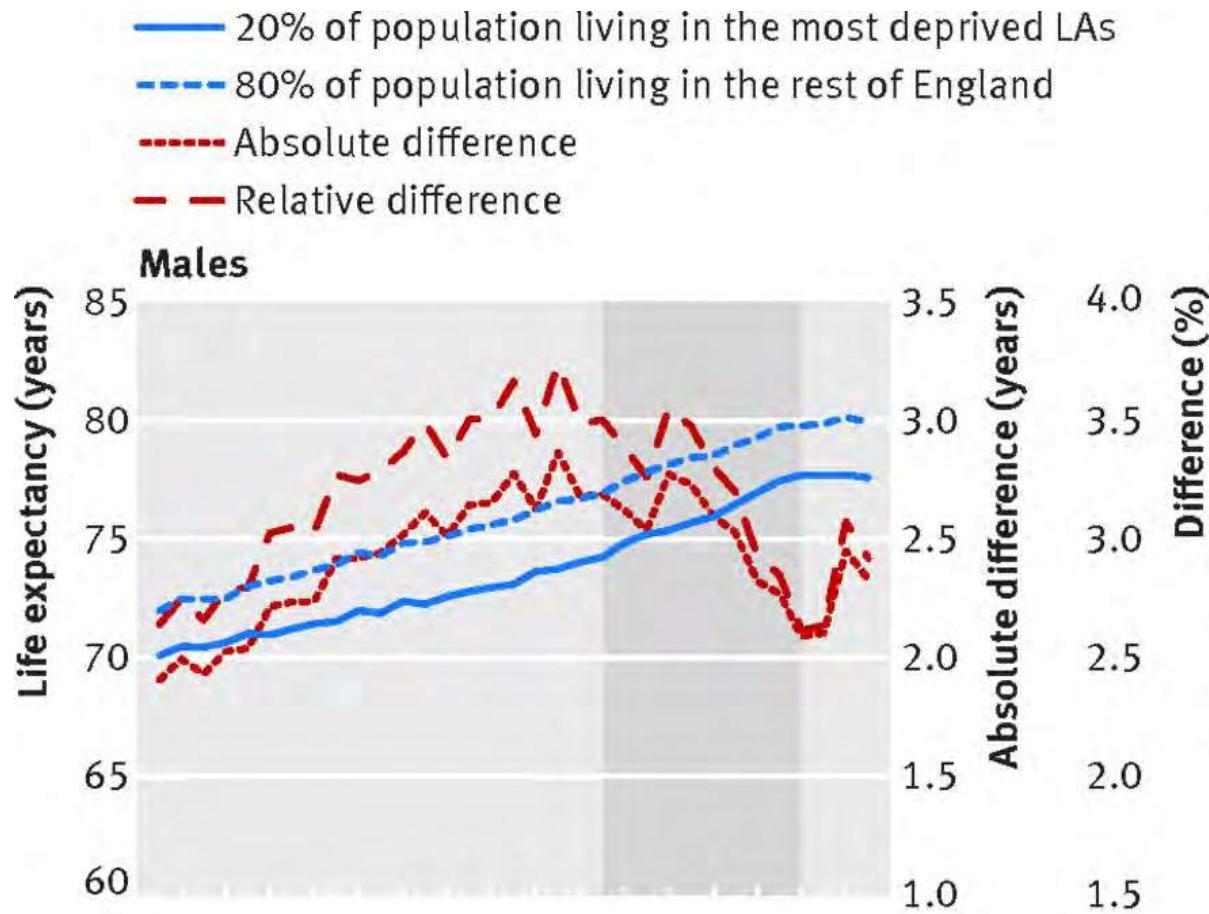
Research report

The impact of New Labour's English health inequalities strategy on geographical inequalities in infant mortality: a time-trend analysis

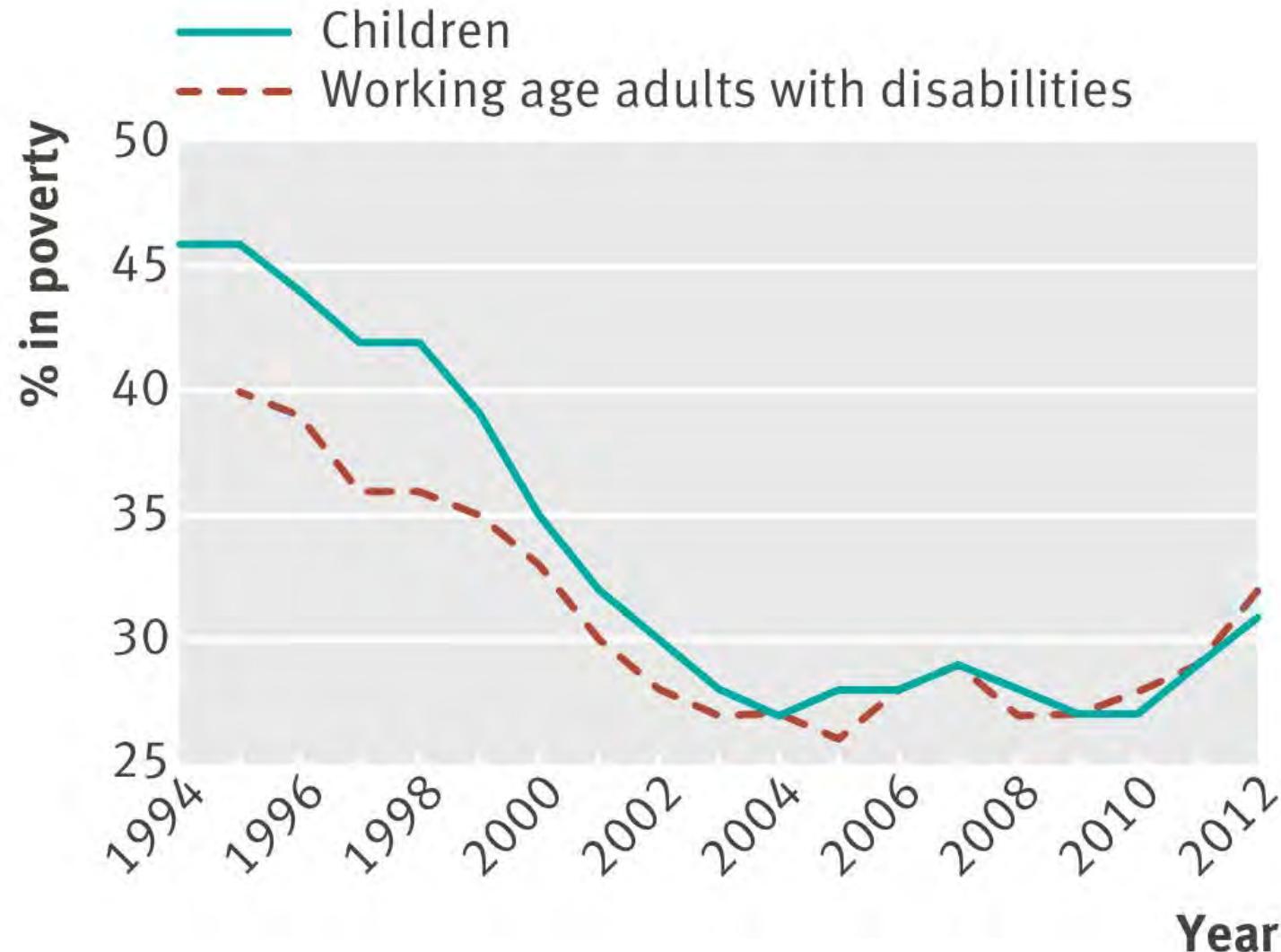
Tomos Robinson,¹ Heather Brown,¹ Paul D Norman,² Lorna K Fraser,³ Ben Barr,⁴ Clare Bambra¹

“Trends in inequalities before, during, and after the strategy show that the strategy reduced these inequalities”

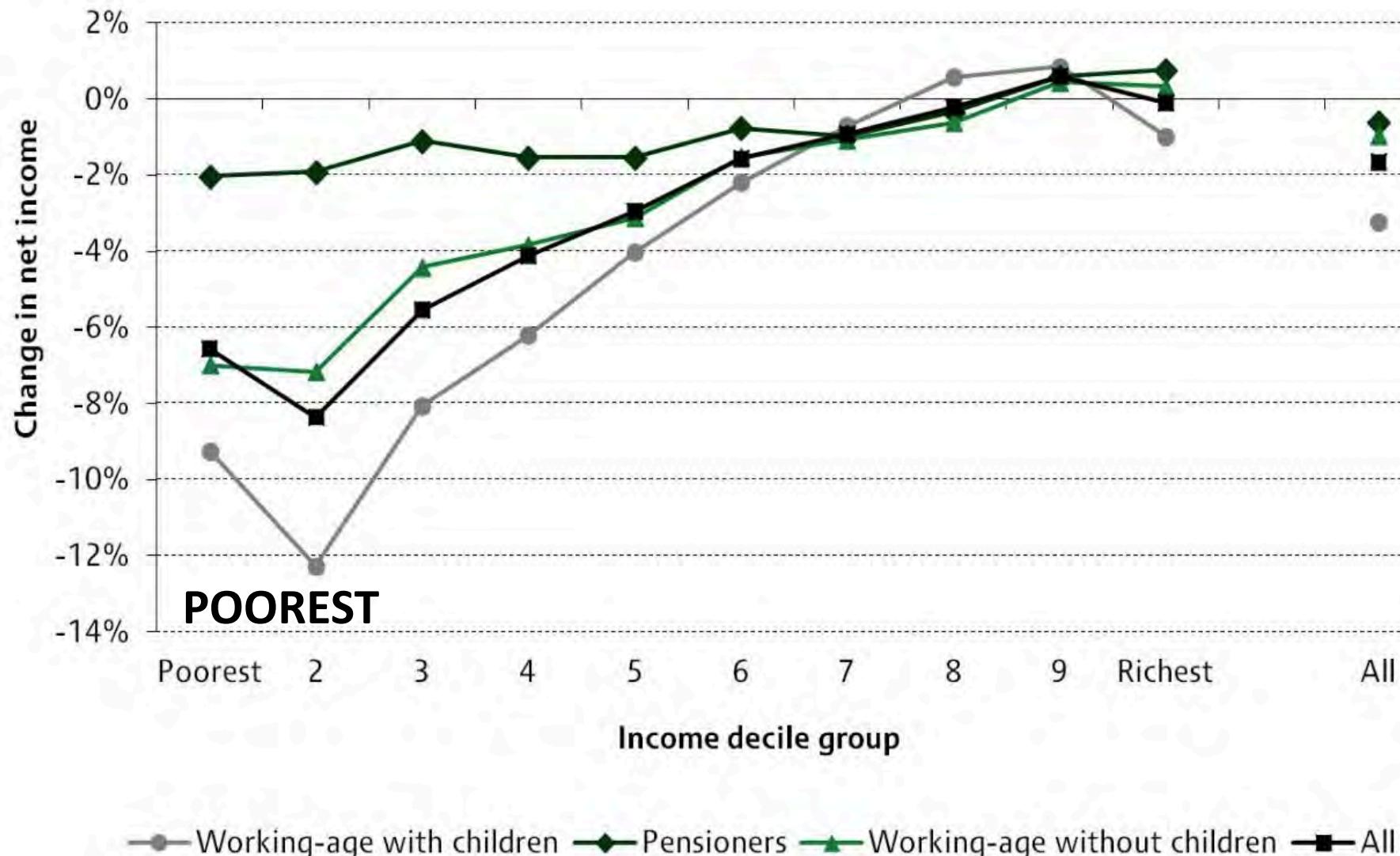
Decrease in inequalities life expectancy and infant mortality as a result of strategy



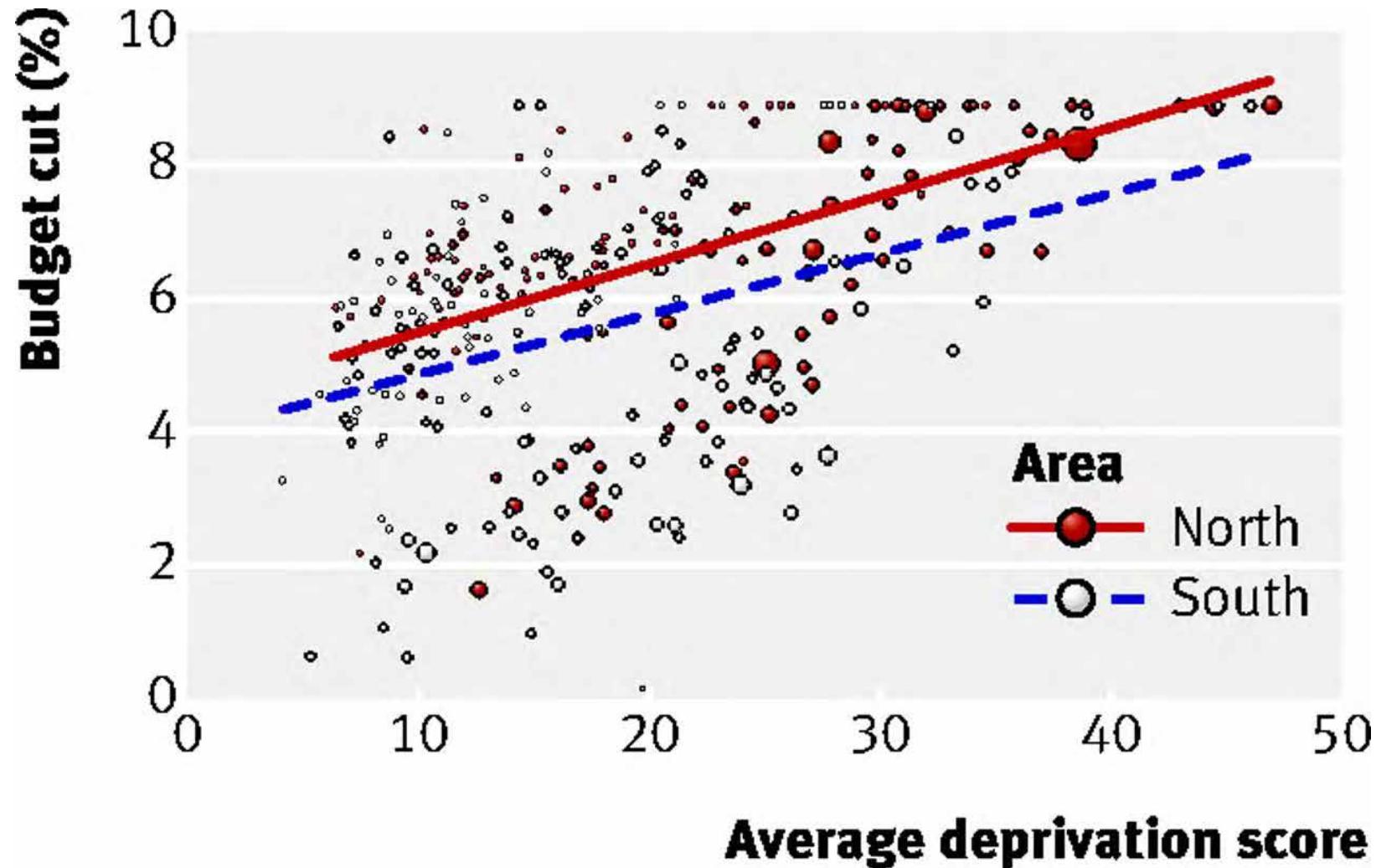
Gains of the past are being undone



Long-run impact of tax and benefit reforms introduced between May 2015 and April 2019 by income decile and household type (including universal credit)

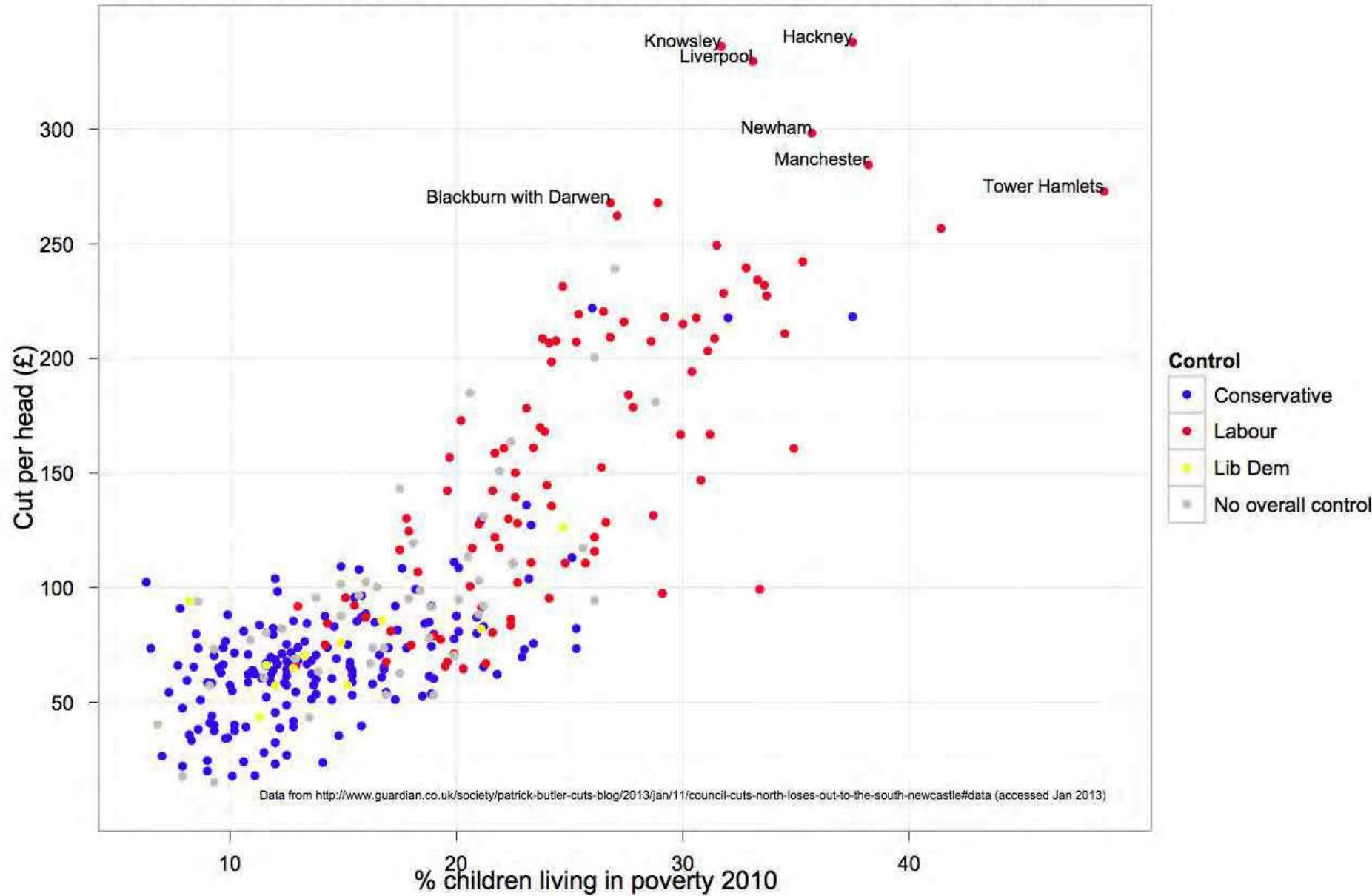


Cut in local authority budget by average deprivation score in north and south of England.



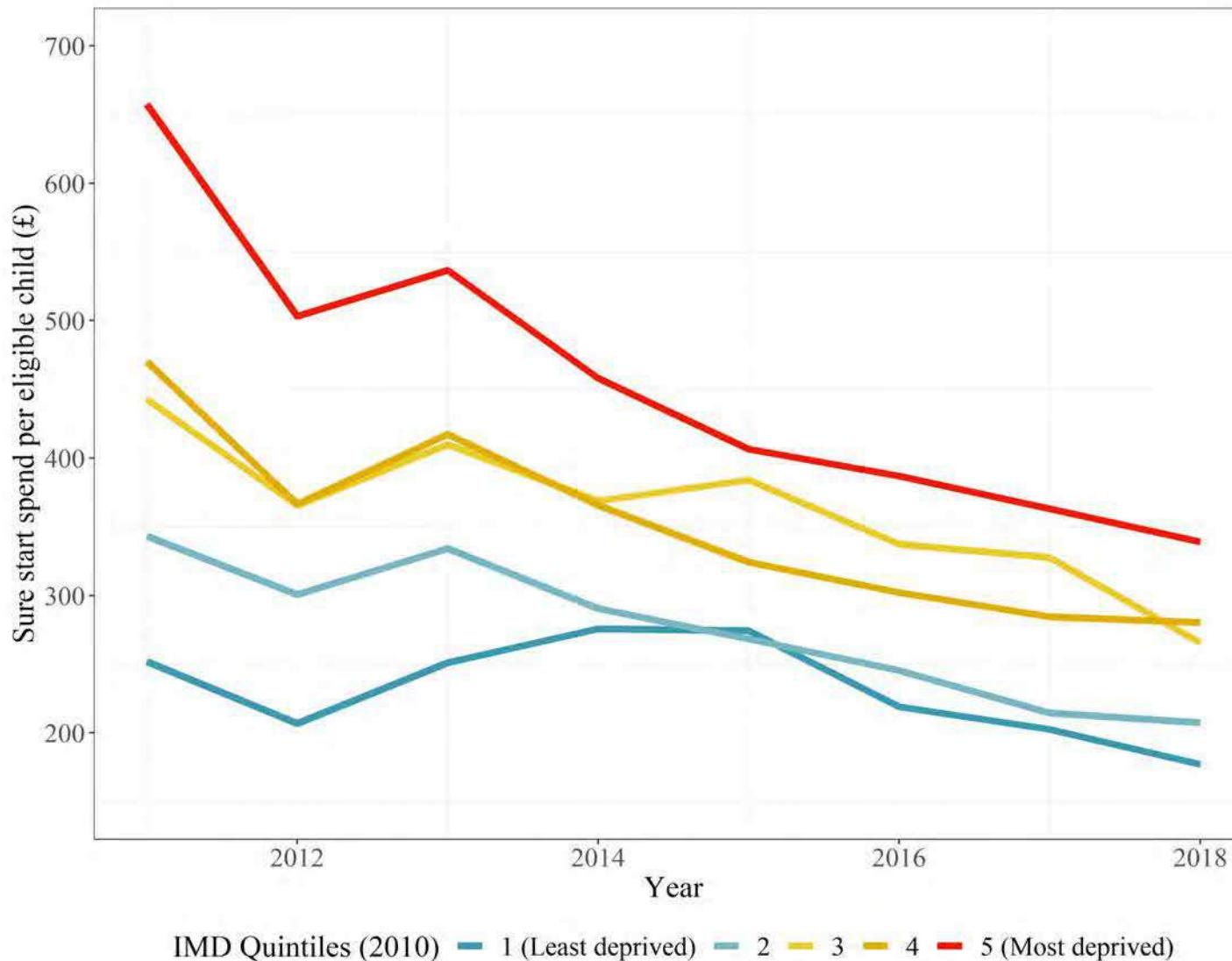
Taylor-Robinson D, Gosling R BMJ 2011;342:bmj.d1487

Local authority budget cut 2010-11 to 2014-15 versus child poverty

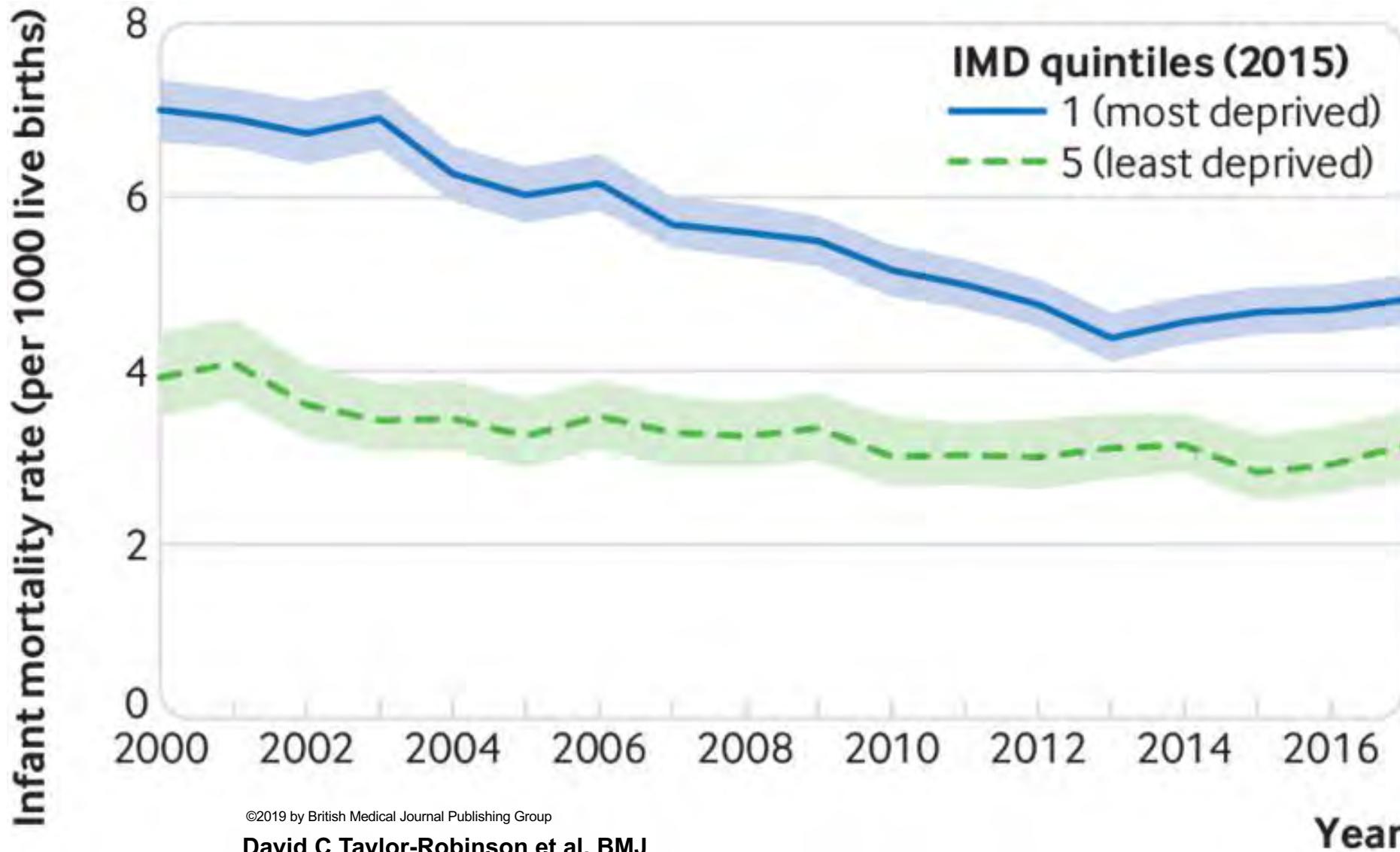


A decade of cuts to children's services

Biggest cuts to prevention in poorest areas



Child health unravelling in UK



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David C Taylor-Robinson et al. BMJ
2019;364:bmj.l963

thebmj

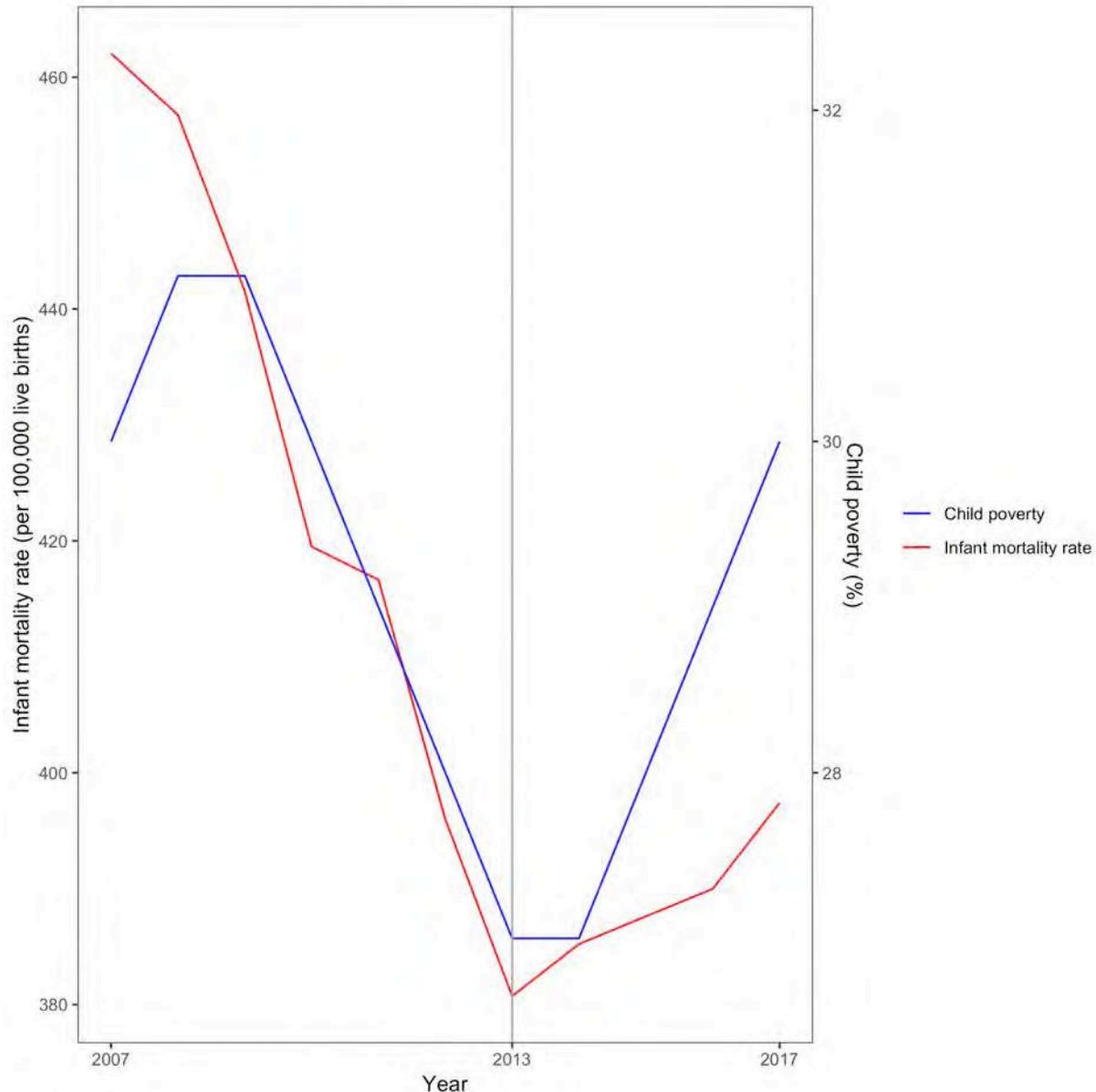
BMJ Open Assessing the impact of rising child poverty on the unprecedented rise in infant mortality in England, 2000–2017: time trend analysis

David Taylor-Robinson,^{1,2} Eric T C Lai,¹ Sophie Wickham,¹ Tanith Rose,¹ Paul Norman,³ Clare Bambra,⁴ Margaret Whitehead,¹ Ben Barr¹



An 'unprecedented' rise in infant mortality linked to poverty in England

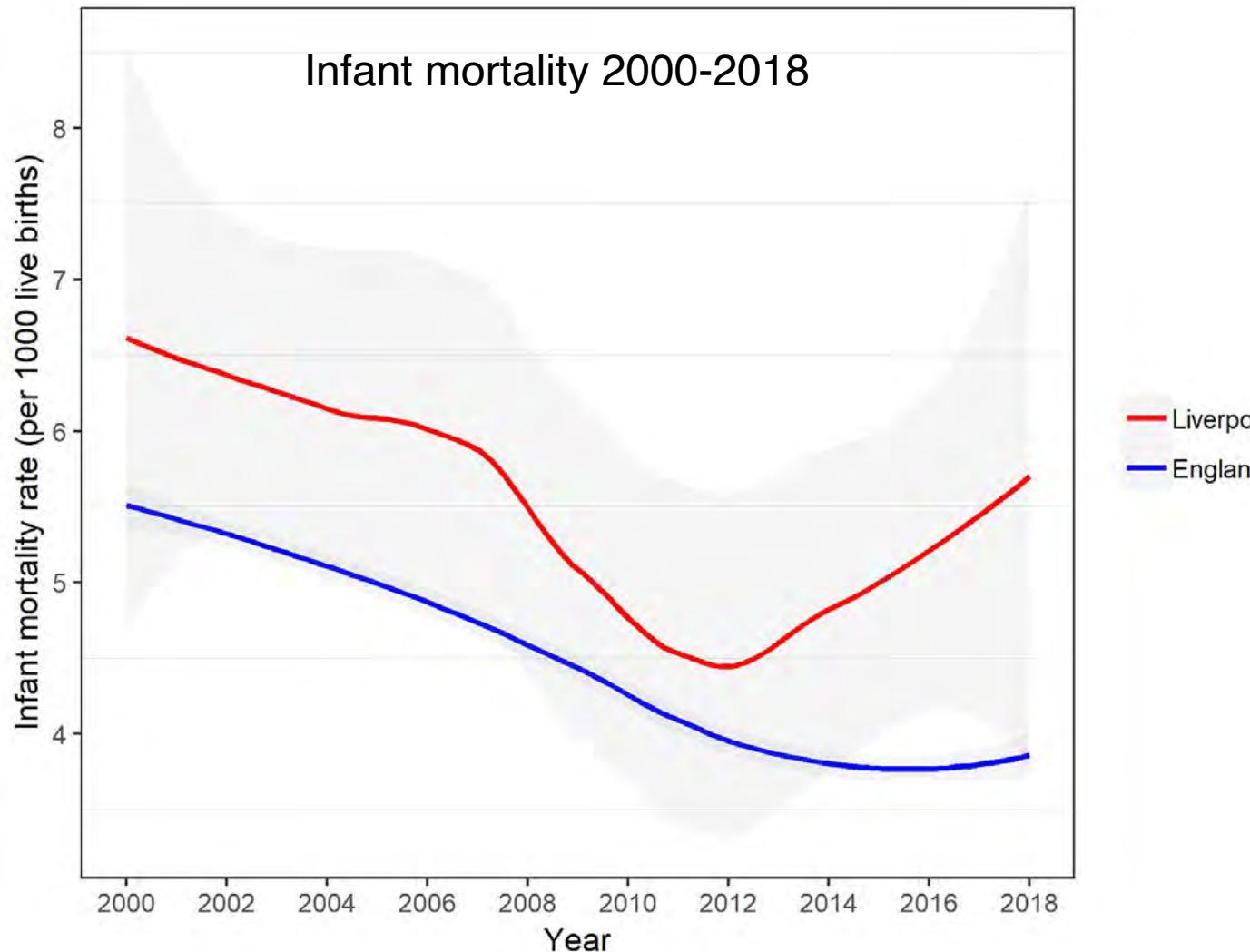
Rising infant mortality, rising child poverty 2007-2017



Each 1% increase in child poverty was significantly associated with an extra 5.8 infant deaths per 100 000 live births (95% CI 2.4 to 9.2).

About a third of the increases in infant mortality between 2014 and 2017 can be attributed to rising child poverty

Early Origins of lifelong inequalities in Liverpool



37% born in poverty

Age 5 years

35% poor development

Age 10 years

40% obese or overweight

Age 5-16 years

>16% mental ill-health

EDITORIAL | VOLUME 393, ISSUE 10170, P377, FEBRUARY 02, 2019

Britain is broken: poor child health proves it

The Lancet

Published: February 02, 2019 · DOI: [https://doi.org/10.1016/S0140-6736\(19\)30162-X](https://doi.org/10.1016/S0140-6736(19)30162-X)



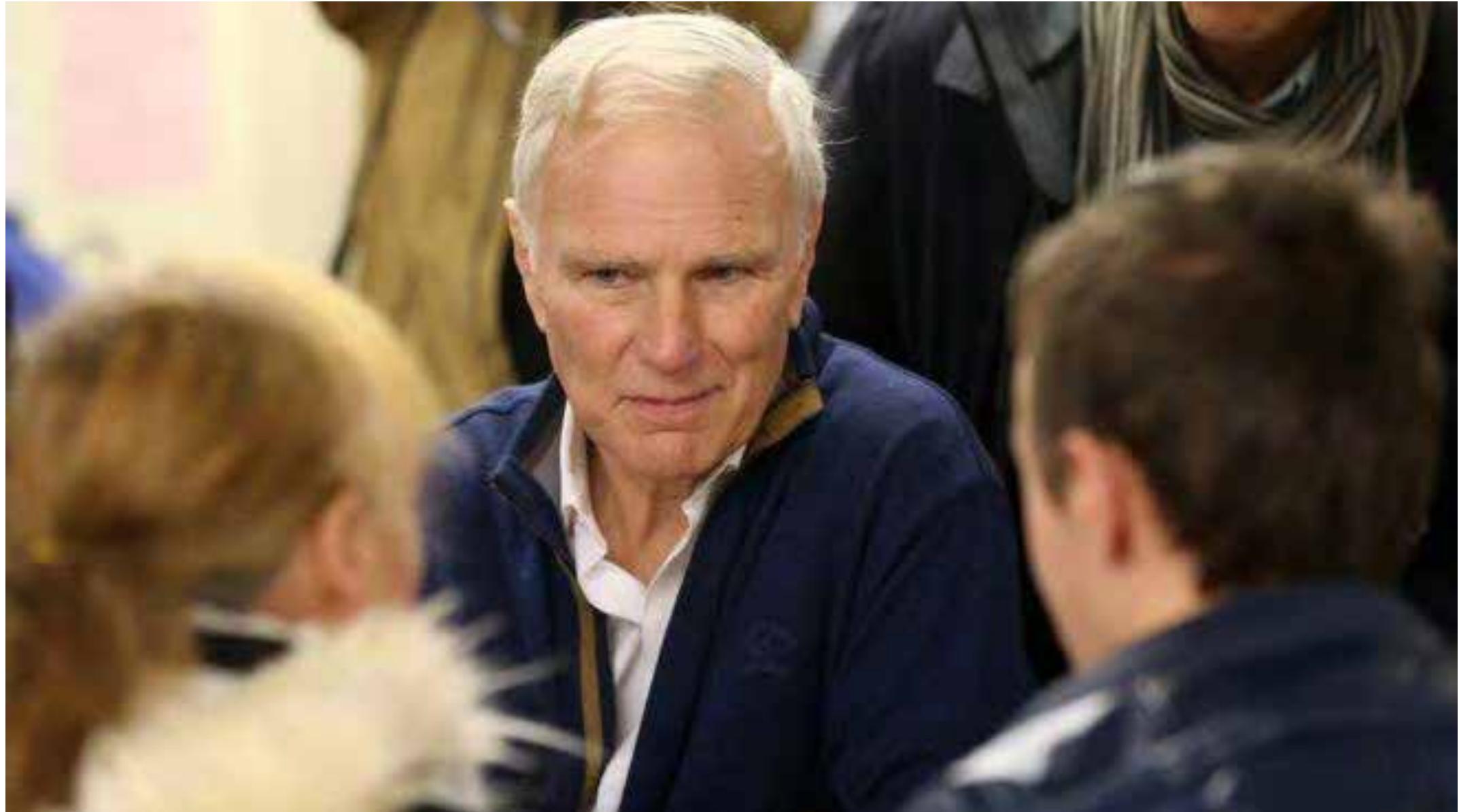
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Article Info

Figures

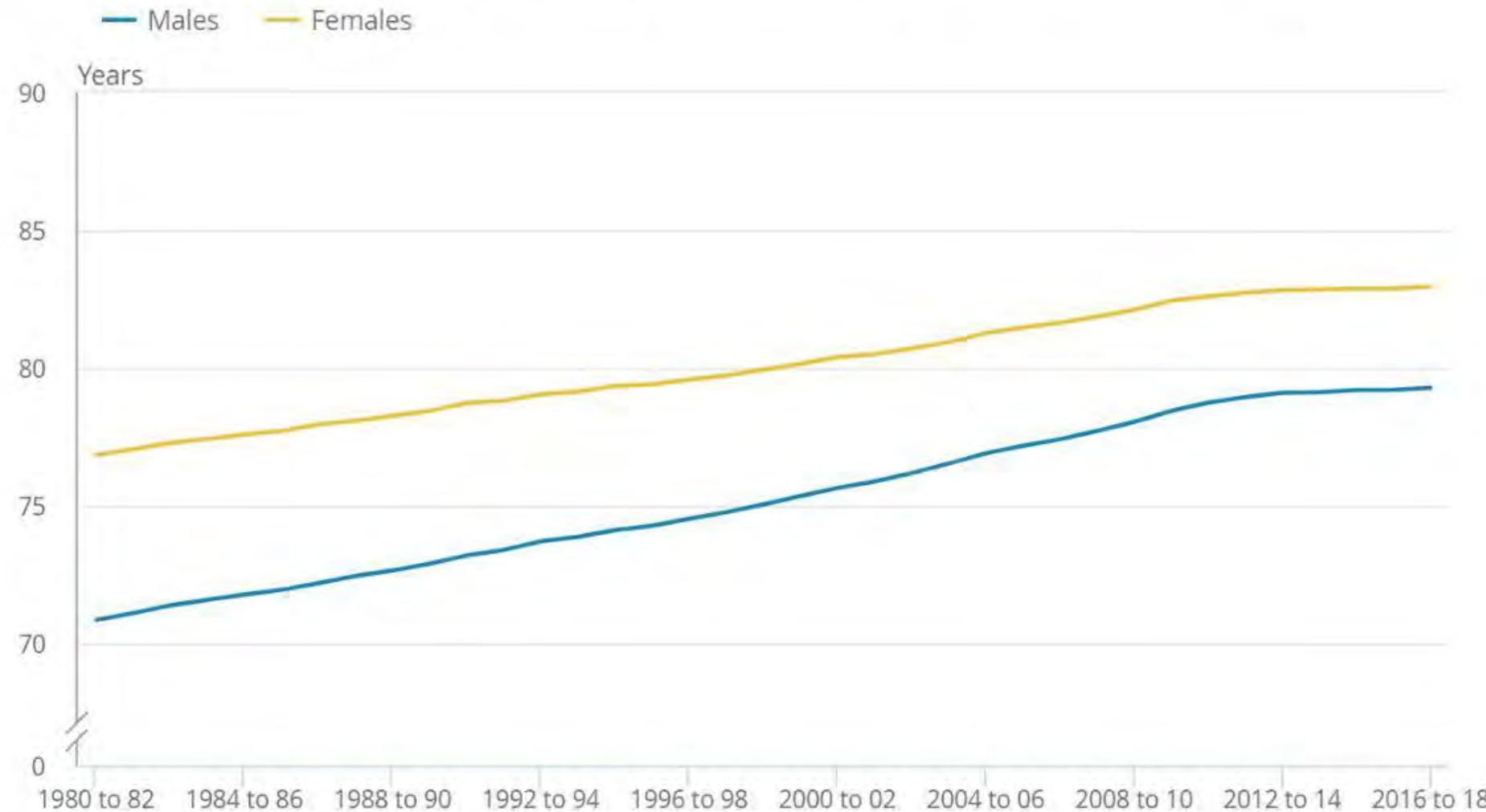
Two years on from the publication of its [landmark report](#)—*State of Child Health*—on the health of children in the UK, the Royal College of Paediatrics and Child Health (RCPCH) released an update on progress towards its recommendations on Jan 23. The report reveals a bleak picture of child health in each of the four UK nations.

“Poverty causing 'misery' in UK, and ministers are in denial”



Life expectancy improvements have slowed down in the UK since 2011

Life expectancy at birth for males and females, UK, between 1980 to 1982 and 2016 to 2018



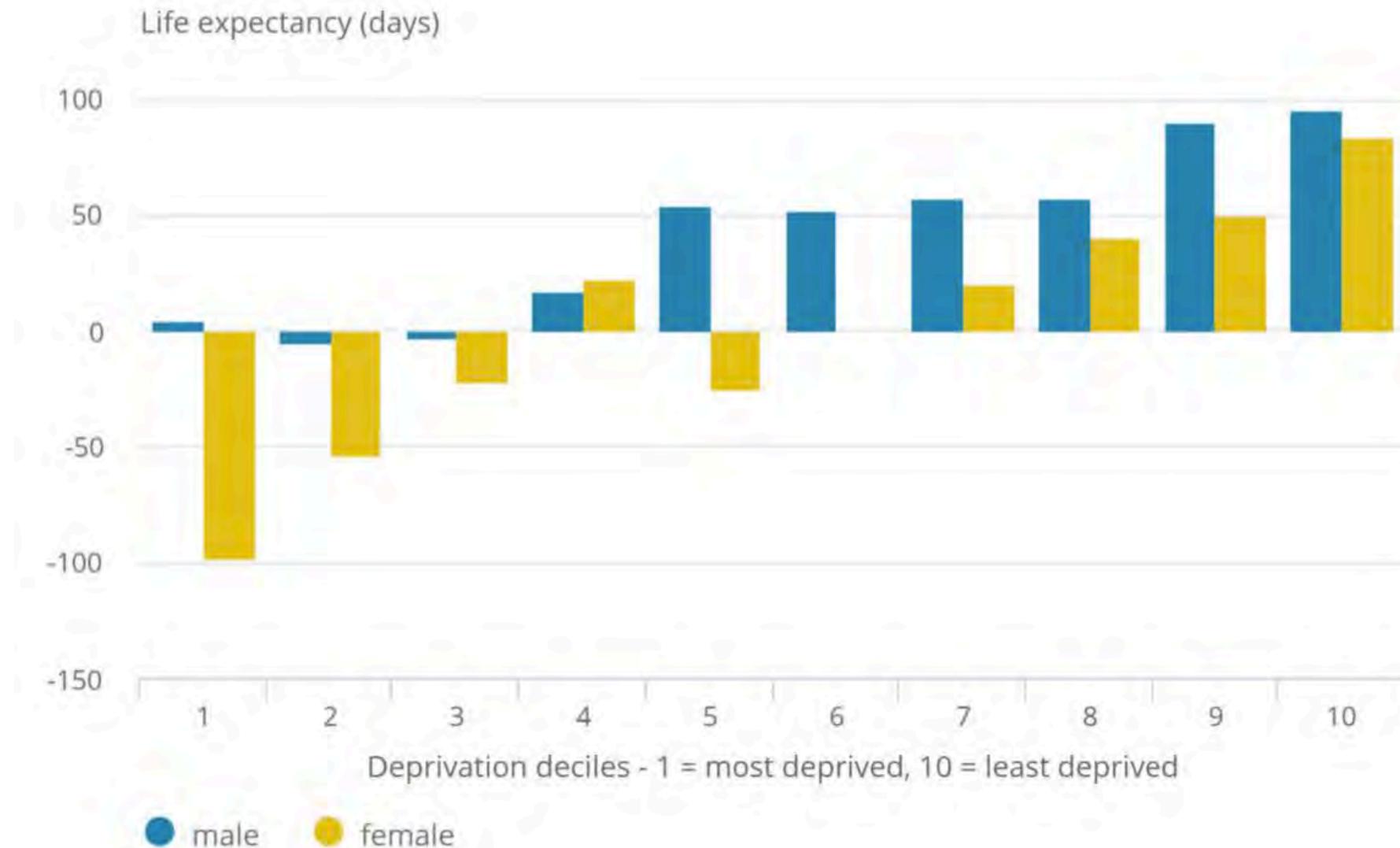
Source: National life tables, UK: 2016 to 2018



Office for National Statistics

Change in life expectancy in days between 2012 to 2014 and 2015 to 2017: by sex and decile, England

<https://www.ons.gov.uk>



Large fall in LE at birth among women in the most deprived areas – increasing inequalities

CORRESPONDENCE | VOLUME 394, ISSUE 10216, P2238-2239, DECEMBER 21, 2019

Stalling life expectancy and rising inequalities in England

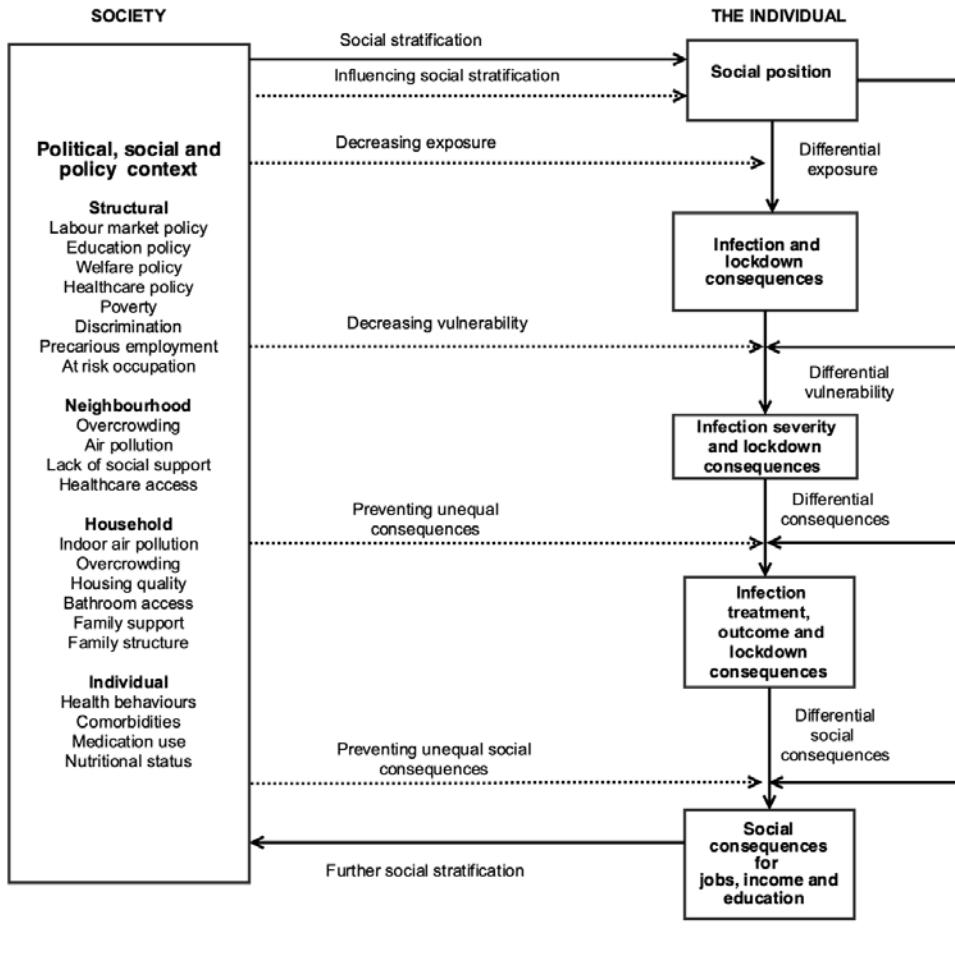
David Taylor-Robinson  • Ben Barr • Margaret Whitehead

Published: December 21, 2019 • DOI: [https://doi.org/10.1016/S0140-6736\(19\)32610-8](https://doi.org/10.1016/S0140-6736(19)32610-8)

“Rises in child poverty, homelessness, food poverty, and a deterioration in mental health have been observed. These have occurred at the same time as a reversal of investment in public services, with the biggest cuts in the most deprived areas.

It is time to acknowledge the elephant in the room—the underlying causes of the disturbing health trends in England—and to design appropriate policies to reverse them.”

Although the pandemic is caused by a virus, the inequalities it generates have social causes



19: We are not “all in it together”—less privileged in society because the the UK’s prime minister Boris Johnson and the rich have had covid-19 doesn’t mean the disease strikes all equally. <https://blogs.bmj.com/bmj/2020/05/22/covid-19-we-are-not-all-in-it-together-less-privileged-in-society-are-suffering-the-brunt-of-the-damage/>



EDITORIALS

Children are being sidelined by covid-19

They must not be left behind in its aftermath

Ian Sinha *consultant*¹, Davara Bennett *researcher*², David C Taylor-Robinson *professor*^{1,2}

¹Alder Hey Children's Hospital, Liverpool, UK; ²Department of Public Health and Policy, Farr Institute@HeRC, Liverpool, UK

When the Titanic sank there was a linear relation between the social class of passengers and their risk of drowning.¹ During the bubonic plague, the upper classes fled Italian cities for safer country residences, heeding the public health advice, “cito, longe, tarde” (flee early, flee far, return late)²; the less wealthy were left behind and died disproportionately as a result. A similar pattern was seen in New Orleans during Hurricane Katrina.³ History tells us that, during times of crisis, vulnerable groups lose out most. The covid-19 pandemic is no different. Emerging data show the pandemic tracking along social fault

circumstances, but for some children the lack of internet, electronic devices, and quiet space at home will further exacerbate inequalities in educational outcomes. Despite plans for the phased reopening of schools, an increasing dependence on supplementary online learning seems assured.

Child poverty

In the longer term, we must consider the effects of an economic recession on child health. Covid-19 has already caused the most aggressive decline in the global economy seen in modern times.¹⁰

Rising poverty and toxic stress in families

Disruption of protective services in health, education and social care

Local areas ill equipped to deal with rising demand pre-crisis



Reducing inequities in health across the life-course

Early years, childhood and adolescence

- Act early
- Act on time
- Act together
- Reduce poverty
- Invest in early child development

https://www.euro.who.int/__data/assets/pdf_file/0008/457289/Reducing-inequities-in-health-across-the-life-course.pdf

COVID-19 and the Northern Powerhouse

Tackling inequalities for
UK health and productivity

Review

Priorities for the child public health response to the COVID-19 pandemic recovery in England FREE

Catherine Hefferon¹,  Catherine Taylor^{1, 2}, Davara Bennett³, Catherine Falconer⁴, Melisa Campbell⁵, Joanna G Williams^{6, 7}, Dave Schwartz⁸, Ruth Kipping⁷, David Taylor-Robinson²

[Author affiliations +](#)



“When surveyed about what makes them happy, C&YP continually emphasise the importance of being loved, safe and listened to, and while they do not deal with finances directly, they stress the importance of having well-funded services and family finances to meet basic needs.”



**LIVERPOOL KICKS OFF BID TO BECOME UNICEF
CHILD FRIENDLY CITY**

