

Where health begins

HEPRU workshop
Strengthening the promotion of child health
in New Zealand
Alison Blaiklock
28 October 2010

Health Promotion Forum

- Vision: Hauora – Everyone's right
- Commitment to Te Tiriti o Waitangi
- We build
 - Leadership
 - Relationships
 - Workforce
- Over 150 organisations are members



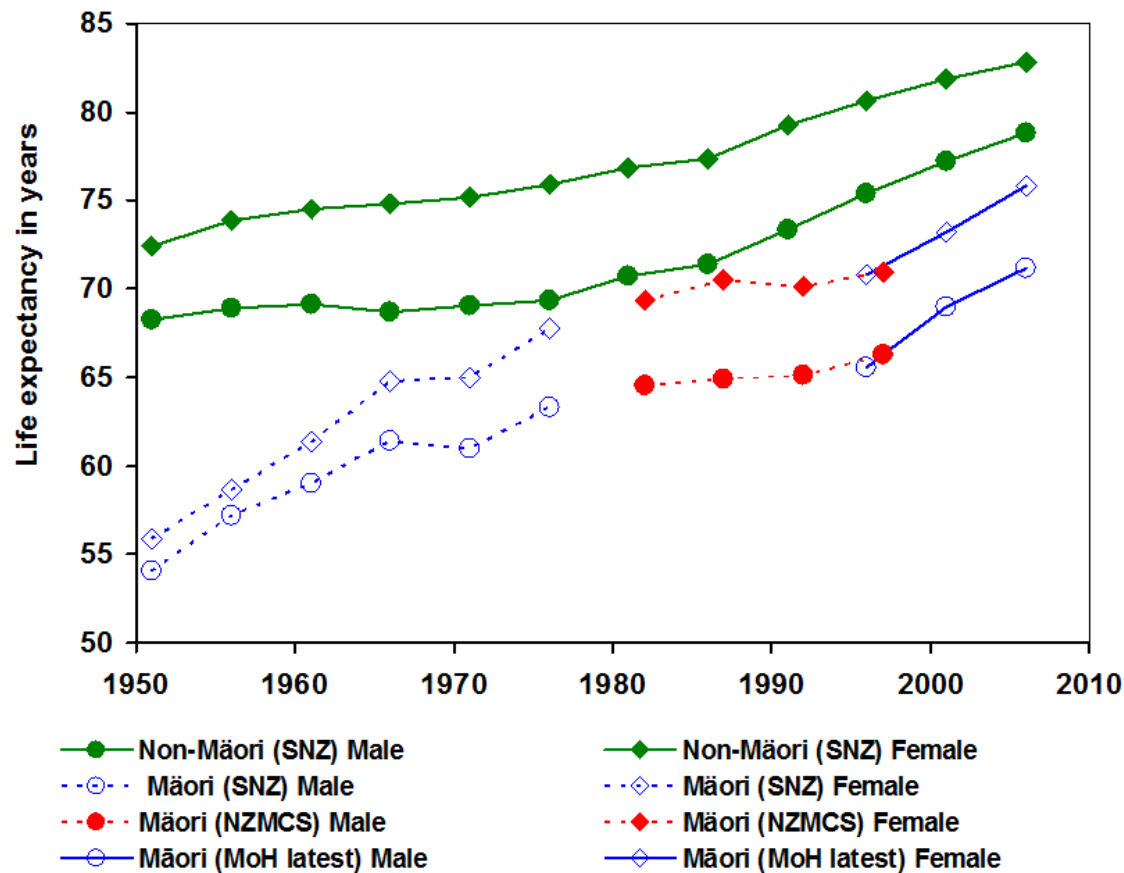
Outline

- Child health status
- Why is child health a priority?
- What works?
- Getting major action





Changes in health equity in New Zealand



Tobias, Blakeley et al,
2009



Important advances in child health

- Reduced rates of infant mortality, injury, smoking and youth suicide
- Improving immunisation rates and access to primary health care
- Increased participation in early childhood education
- More parents with educational qualifications
- Decrease in child poverty – but the gains have left out the poorest children
- Legal protection from assault
- The potential of whanau ora



**Nevertheless – it is much better
to grow old in New Zealand than
to grow up in New Zealand.**



www.hauora.co.nz

How does New Zealand measure up in caring for children and young people?

- The 2009 OECD report, *Doing Better for Children* ranked New Zealand 29th out of 30 countries for health and safety and 24th out of 30 for risk behaviors.
- Compared with similar countries, we have high rates of injury morbidity and mortality, child abuse, youth suicide, Sudden Unexplained Death in Infancy, communicable diseases, rheumatic fever, pneumonia, bronchiectasis, teenage pregnancies, tooth decay, and low rates of immunisation.



Inequity and poverty

- Māori and Pacific children experience high rates of disadvantage on many measures.
- New Zealand has a wide gap between rich and poor and high rates of child poverty compared with other OECD countries.
- Discrimination against children with disabilities, who are refugees or new migrants or gay, whose parents are beneficiaries, or who have a parent in prison etc.



- Children living in New Zealand's least deprived neighbourhoods have the same infant mortality rates as children in Norway or Japan.
- Children living in the most deprived neighbourhoods have infant mortality rates that are worse than all but two OECD countries.

- Public Health Advisory Committee, 2010



Why do we do badly by our children?

- Children are not a political priority
 - Low status of children
 - Children don't vote
 - Racism
- Low investment in the early years
- Messy policies and policy making
- Poverty, housing, tobacco, access to primary care



‘Children do not just grow up according to internal laws of biology; they grow and develop through the interplay of human relationships.’

- Early Child Development: A *Powerful* Equalizer, 2008



Why prioritise children and young people?

- Because this is who we are as people
- Because children and young people carry our heritage, bring joy to the present, and enable the future
- And for moral, legal and pragmatic reasons



Moral and legal reasons

Children and young people cannot wait – they have only one opportunity for growing up

Children and young people have rights to special protection and consideration



UN Convention on the Rights of the Child

- Ratified by New Zealand in 1993
- Principles
 - Non-discrimination
 - Best interests of the child
 - Life, survival and development
 - Respect for the views of the child



Pragmatic reasons

- Childhood experiences have lifelong impact
- Economic investment in the early years of life brings a high return
- Communities and societies that are good for children are generally good for everyone
- The future wellbeing of older people depends on the children of today



What works

- **Prioritising the early years**
- **Nuturing relationships and supportive environments for children and young people, and those who care for them**
- **Access to health care**
- **Improving determinants of health**
- **Collaborative, participatory and comprehensive approaches**
- **Working with children and young people**
- **Government and community leadership**
- **Respect for the dignity of each person and all peoples**





The Best Start in Life: Achieving effective action on child health and wellbeing

A report to the Minister of Health
Prepared by the
PUBLIC HEALTH ADVISORY COMMITTEE



The Best Start in Life: Achieving effective action on child health and wellbeing



www.hauora.co.nz

Getting major action

Is taking too # long!

**Opportunities to reorient
what we do and how we work**

Growing children's movement

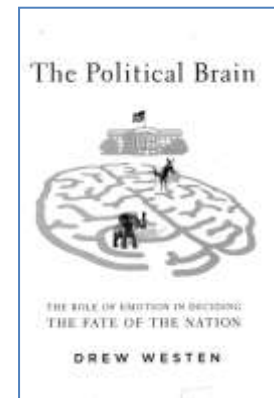
Increased public concern

Some gains

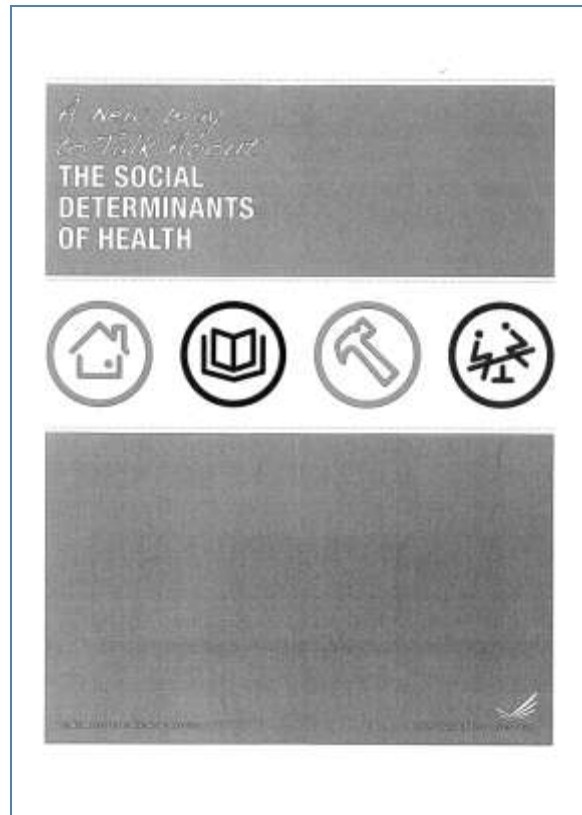


What can we learn from politicians?

- The power of language
- Deeply held views about morality and the role of the state
- Emotion and rationality



“A New Way to Talk about the Social Determinants of Health”



- US Research
- Robert Wood Johnson Foundation
- To find how to talk about determinants with people from different worldviews and across the political spectrum

“... something that starts in our families, in our schools and workplaces, in our playgrounds and parks, and in the air we breathe and the water we drink. The more you see the problem of health this way, the more opportunities you have to improve it. . . . It's time we expand the way we think about health to include how to keep it, not just how to get it back.”



A New Way to Talk about the Social Determinants
of Health, 2010



Six ways to talk

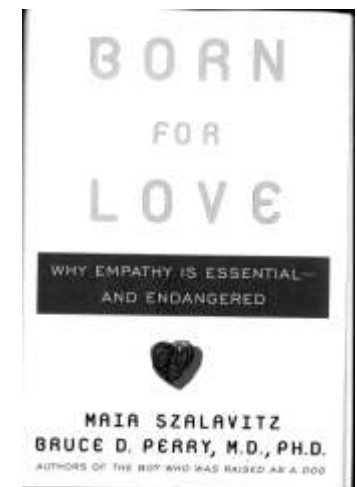
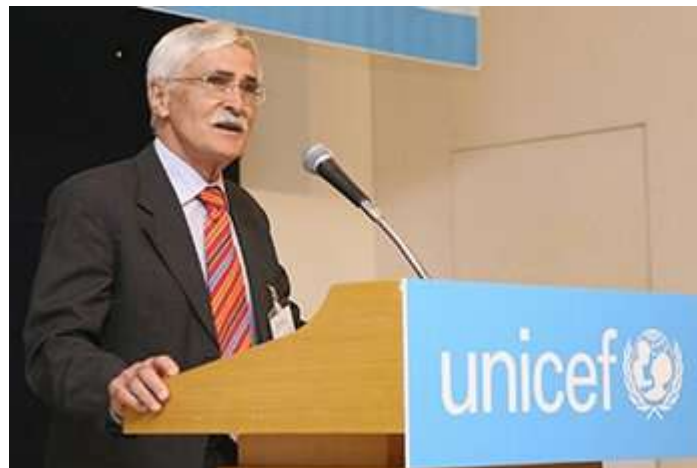
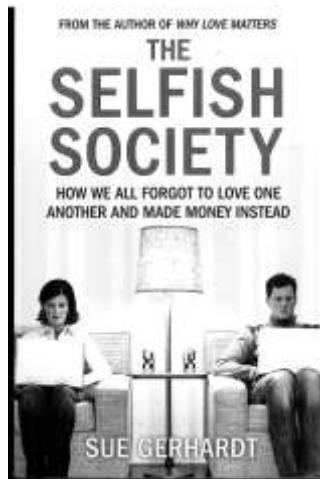
with Americans about determinants

- **Health starts—long before illness—in our homes, schools and jobs.**
- **All Americans should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education or ethnic background.**
- **Your neighbourhood or job shouldn't be hazardous to your health.**
- **Your opportunity for health starts long before you need medical care.**
- **Health begins where we live, learn, work and play.**
- **The opportunity for health begins in our families, neighbourhoods, schools and jobs.**

From “A New Way to Talk about the Social Determinants of Health”



How to build empathic, caring, healthy and equitable communities, societies and world



Kia ora and Thank you



Runanga Whakapiki Ake i te Hauora o Aotearoa
Health Promotion Forum of New Zealand

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