

## **SUMMARY**

# **Features of Early Childhood Development (ECD) Interventions that Promote Health Equity**

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## SUMMARY: Features of ECD Interventions that Promote Health Equity

The theory that family poverty adversely affects children's health, intellectual capabilities, academic achievement, and behaviour is well-documented.<sup>1</sup> Childhood disadvantages have lasting negative impacts on children's health and well-being. Various policies and interventions can attenuate poverty's negative influence on child development.

In considering equity in health, Whitehead and Dahlgren, in a 2006 World Health Report<sup>2</sup>, discussed ten principles for policy action:

1. *Policies should strive to level up, not level down*
2. *The three main approaches to reducing social inequities in health are interdependent and should build on one another: focusing on people in poverty only, narrowing the health divide and reducing social inequities throughout the whole population*
3. *Population health policies should have the dual purpose of promoting health gains in the population as a whole and reducing health inequities*
4. *Actions should be concerned with tackling the social determinants of health inequities*
5. *Stated policy intentions are not enough: the possibility of actions doing harm must be monitored*
6. *Select appropriate tools to measure the extent of inequities and the progress towards goals*
7. *Make concerted efforts to give a voice to the voiceless*
8. *Wherever possible, social inequities in health should be described and analysed separately for men and women*
9. *Relate differences in health by ethnic background or geography to socioeconomic background*
10. *Health systems should be built on equity principles*

In terms of the **features of interventions that may promote health equity or protect against increased inequities**, common elements of programs that promote aspects of health equity appear to be collaboration, sustained funding, and leadership. There is evidence that program models that look to build relationships across the family, the school, and the community can improve outcomes for low income and socially culturally marginalized families. Another important feature is for programs to employ a health equity and social determinants of health approach, e.g., focusing on poverty reduction, early environment initiatives, neighbourhood factors, and coordination across sectors.

To better understand the nature and extent of inequities, 'equity proofing' or health equity audits may serve as tools.<sup>3</sup> Health equity tools have been summarized by the Equity Lens for Public Health project at the University of Victoria: <http://www.uvic.ca/research/projects/elph/>.

The information on health equities is distributed throughout the document in the sections for which there is literature related to equity issues. Readers wanting to use this document to obtain details of programs that feature equity components may wish to refer to the intervention topics of interest in Sections 2 and 3.

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<sup>1</sup> Reference 187, SECTION V, REFERENCES (Main Document)

<sup>2</sup> Reference 423, SECTION V, REFERENCES (Main Document)

<sup>3</sup> For more on this, please see BC Ministry of Health's Core Programs Evidence Review "Equity Lens" (e.g., The Health Equity Audit and Equity Lens sections p. 28-29, with table) as useful resources. See Reference 424, SECTION V, REFERENCES (Main Document).