

Child and adolescent health: top down and bottom up in public health policy.

Professor Mike Kelly
Primary Care Unit, Institute of Public Health,
University of Cambridge

- Top down or bottom up?
- Upstream or downstream?



Ladder of interventions.

- Eliminate choice.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.
- Guide choice through disincentives.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.
- Guide choice through disincentives.
- Guide choice through incentives.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.
- Guide choice through disincentives.
- Guide choice through incentives.
- Guide choice through changing the default.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.
- Guide choice through disincentives.
- Guide choice through incentives.
- Guide choice through changing the default.
- Enable choice.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.
- Guide choice through disincentives.
- Guide choice through incentives.
- Guide choice through changing the default.
- Enable choice.
- Provide information.

Ladder of interventions.

- Eliminate choice.
- Restrict choice.
- Guide choice through disincentives.
- Guide choice through incentives.
- Guide choice through changing the default.
- Enable choice.
- Provide information.
- Do nothing.

NICE

The National Institute for Health and Care Excellence (NICE) is the independent organisation in the UK responsible for providing national guidance to the NHS and the wider public health community on the **promotion of good health and the prevention** and treatment of ill health.



The Primary Care Unit

The pillars of NICE's approach.



- Comprehensive evidence base
- Expert input
- Patient and carer involvement and community engagement.
- Extensive consultation
- Regular review
- Open and transparent process
- Independent advisory committees

Some of the NICE public health guidelines aimed at children and young people.

- Smoking: preventing uptake in children and young people.
- <https://www.nice.org.uk/guidance/ph14>

Campaigns (Information).

- Develop national, regional or local mass-media campaigns to prevent the uptake of smoking among young people under 18. The campaigns should:
 - be informed by research that identifies and understands the target audiences;
 - consider groups which epidemiological data indicate have higher than average or rising rates of smoking;
 - be developed in partnership with: national, regional and local government and non-governmental organisations, the NHS, children and young people, media professionals (using their best practice), healthcare professionals, public relations agencies and local anti-tobacco activists.

Convey messages based on strategic research and qualitative pre- and post-testing with the target audiences. These could include messages that:

- elicit a strong, negative emotional reaction (for example, loss, disgust, fear) while providing sources of further information and support;

- portray tobacco as a deadly product, not just as a drug that is inappropriate for children and young people to use;

- empower children and young people to refuse offers of cigarettes;

- include graphic images portraying smoking's detrimental effect on health as well as appearance (for example, its effect on the appearance of skin and teeth).

The retail environment.

- Ensure retailers are aware of legislation prohibiting under-age tobacco.
- Make it as difficult as possible for young people under 18 to get cigarettes and other tobacco products.

- Physical activity for children and young people.
- <https://www.nice.org.uk/guidance/ph17/history>

- Ensure there are local indoor and outdoor opportunities for physical activity where children and young people feel safe.
- Ensure that the factors that help children and young people to be (or which prevent them from being) physically active are identified and acted upon.
- Ensure that local transport and school travel plans are coordinated so that all local journeys can be carried out using a physically active mode of travel.

- Social and emotional wellbeing in primary education
- <https://www.nice.org.uk/guidance/ph12>

- Develop a curriculum that integrates the development of social and emotional skills within all subject areas. (These skills include problem-solving, coping, conflict management/resolution and understanding and managing feelings.) This should be provided throughout primary education by appropriately trained teachers and practitioners.
- Ensure teachers and practitioners have the knowledge, understanding and skills to deliver this curriculum effectively. The training should include how to manage behaviours and how to build successful relationships.

- Support to help parents or carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners. In addition, all parents should be given details of the school's policies on promoting social and emotional wellbeing and preventing mental health problems.

- Provide integrated activities to support the development of social and emotional skills and wellbeing and to prevent bullying and violence in all areas of school life. For example, classroom-based teaching should be reinforced in assemblies, homework and play periods (in class as well as in the playground).

Individual approaches.

- Ensure teachers and practitioners are trained to identify and assess the early signs of anxiety, emotional distress and behavioural problems among primary schoolchildren. They should also be able to assess whether a specialist should be involved and make an appropriate request.
- Identify and assess children who are showing early signs of anxiety, emotional distress or behavioural problems. Normally, specialists should only be involved if the child has a combination of risk factors and/or the difficulties are recurrent or persistent.

Other examples.

- Alcohol: school-based interventions
- <https://www.nice.org.uk/guidance/ph7>

- Sexually transmitted infections and under-18 conceptions: prevention.
- <https://www.nice.org.uk/guidance/ph3>

- <https://www.nice.org.uk/guidance/published?type=ph>



Overall lessons.

- The world is complex.

Overall lessons.

- The world is complex.
- We need to take an integrated approach.

We need to factor in the following.

Human biology

Human biology

- The social transmission of biological disadvantage.
- Developmental programming.

The individual

- People think and act in ways that we must work with rather than against.



The automatic and reflective systems.

The automatic and reflective systems.

- We are thinking rational creatures.

The automatic and reflective systems.

- We are thinking rational creatures.
- But we also respond automatically to cues in our environments.

Our immediate environments.

- The home.
- The school.
- The community.



UNIVERS
CAMBRIDGE

Primary Care Unit



**UNIVERSITY OF
CAMBRIDGE**

The Primary Care Unit



**UNIVERSITY
CAMBRIDGE**

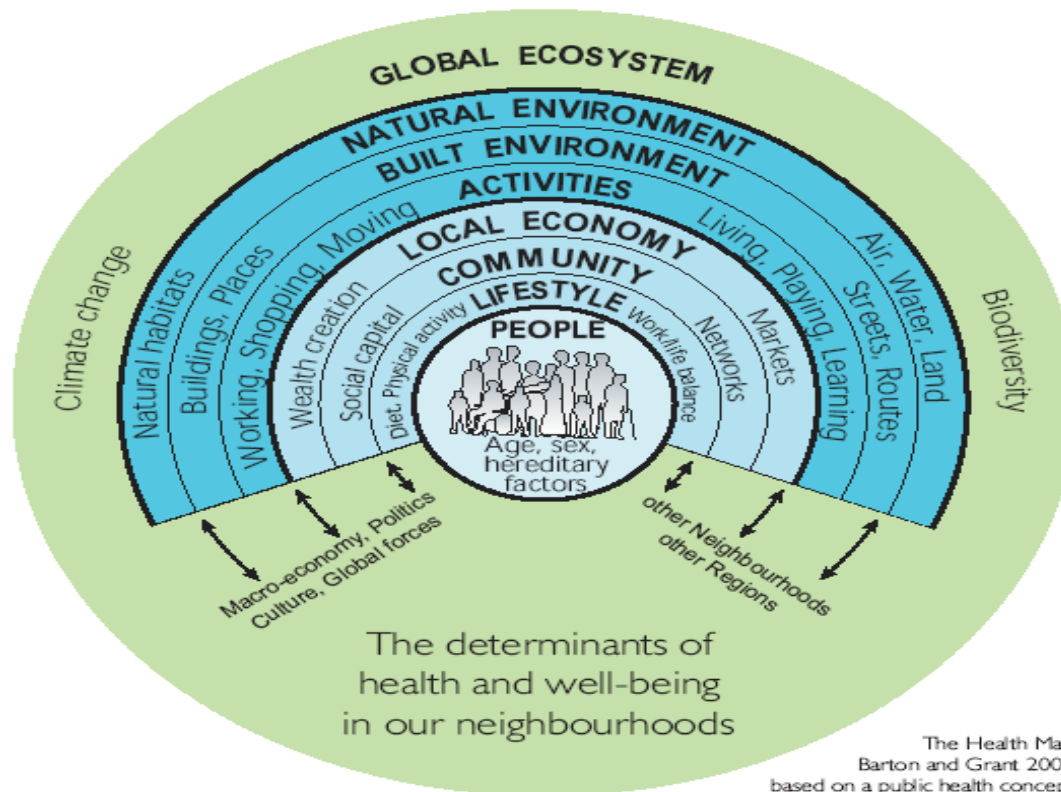
Primary Care Unit

The broader physical and biological environments.



Health Map

A tool for investigating the impacts of the natural and built environment on public health, developed in association with the UKPHA Strategic Interest Group and the World Health Organisation Healthy Cities programme



The Health Map
Barton and Grant 2006
based on a public health concept
by Whiteread and Dahlgren, The Lancet 1991



The life course model

