The impact of neighbourhood physical and social environments on child and family well-being

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Outline

• Evidence regarding the impact of environmental factors on children and families
• Evidence regarding the efficacy of efforts to address these environmental impacts
• Towards a new approach: a comprehensive community-based service framework
EVIDENCE REGARDING ENVIRONMENTAL IMPACTS ON CHILDREN AND FAMILIES
Evidence of the importance of geography

- Geography plays a significant role in determining the nature and function of place in people’s lives: overcoming distance involves time, energy and resources.
- Tobler’s First Law of Geography always applies: ‘everything is related to everything else, but near things are more related than distant things’ (Tobler, 1970).
- The spatial organisation of human activities is a function of distance, with relationships being strongest between those who are geographically closest.
- This applies to a range of relationships: between families and other families, between families and services, and between services and other services.
Evidence that place matters for people’s well-being

- Both the local social environment and the built environment influence people’s health and well-being.
- Key aspects of the built environment are activity-promoting environments, nutrition-promoting environments, housing, transportation, environmental quality, product availability, and aesthetic / ambiance.
- The social environment also matters, with the key elements being trust and reciprocity.
- Trust includes trust within established relationships and social networks, generalised trust in strangers, and civic or institutionalised trust, which refers to basic trust in our formal institutions of governance.
- Even ‘consequential strangers’ matter.
Evidence that place matters for children’s well-being

• Children’s environmental well-being – their daily experience of living and learning the in environment around them, and their options and opportunities for experiencing a healthy environment in the future – affects their overall wellbeing.

• Growing up in a neighbourhood characterised by general community neglect negatively affects children’s outcomes over and above the effects of family socioeconomic status.

• Children’s perception of their neighbourhoods in terms of the trustworthiness of the people who live there or feeling safe walking alone has a strong association with childhood psychopathology, particularly emotional disorders, independently of the nature of the neighbourhood itself.

• Proposals for promoting child-friendly cities have been developed by UNICEF.
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Evidence of the importance of the physical environment for children’s health and well-being

• The physical environment can influence child development both directly and indirectly via adult caregivers.

• Aspects of the physical environment that have been shown to be important for child development include:

  • *Behavioral toxicology*. Heavy metals, inorganic solvents, and pesticides commonly found in the ambient environment affect both cognitive and socioemotional development in children.
  
  • *Noise*. Chronic exposure to noise in the forms of transportation, music, and other people has adverse effects on children’s cognitive development (reading levels, long-term memory), psychophysiology (blood pressure, neuroendocrine stress hormone levels), mental health, and motivation.
Evidence of the importance of the physical environment for children’s health and well-being (cont)

- **Crowding.** The number of people per room, rather than areal markers of density (e.g., people per acre), is the critical index of crowding related to human well-being, with crowded living conditions adverse effects on a range of child outcomes.

- **Housing quality.** Several studies indicate potential adverse impacts of housing quality on children's socioemotional development, with longer exposure having more adverse effects.

- There is also evidence of the importance of parks and green spaces for child development - contact with nature may be as important to children as good nutrition and adequate sleep.
Evidence that social support matters for people’s well-being

• Among adults, social support has a significant impact on health and well-being
• Social support is also linked to a number of child and family outcomes, including low birthweight, child abuse and neglect, maternal adjustment, mental health and physical health
• Family isolation can be the result of various factors: geography (living in rural and remote areas), physical (cut off from the local neighbourhood by a main highway), poor health, disability or special needs, cultural isolation (not being able to speak the language), social isolation (being new to an area and not knowing anyone), lack of money to reciprocate hospitality, lack of education, and lack of transport.
Evidence that social support matters for people’s well-being (cont)

Whatever the cause, social isolation damages both child development and family functioning:

All families, including those living in urban areas, need access to information that helps them gain a realistic understanding of their child’s development and of the possible impact of developmental changes on family life. Families living in isolated circumstances, but particularly geographical isolation, are often deprived of incidental encounters with other children and other parents within the local neighbourhood, encounters that can provide such information, reduce the intensity of uncertainty and alleviate parental anxiety (Fegan and Bowes, 1999).
Evidence that social networks matter for people’s behaviour and well-being

• Social networks influence our ideas, emotions, health, relationships, behaviour, and even our politics.

• There are two fundamental properties of social networks: connection and contagion.
  
  • *Connection* has to do with who is connected to whom. We live in a surprisingly small world, connected by six degrees of separation.
  
  • *Contagion* pertains to what flows across the ties we have with others. These effects are not as far reaching: we are connected by three degrees of influence.

• Contagion mean that we are affected by a wide range of people whom we never meet.
Evidence that social networks matter for people’s behaviour and well-being (cont)

- Networks have emergent properties, with whole networks acting as superorganisms, growing and evolving.
- The perspective of the individual in such a complex system is very limited:

‘… all experience is local – we only know what we know, and the rest of the world, by definition, lies beyond our radar screen. In social networks, the only information we have access to, and therefore the only data we can use to make assessments of the world, lies in our local neighbourhood – our friends and acquaintances.’

‘… individuals living in a small-world network cannot tell what kind of world they’re living in – they see themselves as living in a tight cluster of friends who know each other. ‘ (Watts, 2003)
Evidence of growing health and social inequities

• Despite the growth in overall prosperity, there has been a widening of the gap between the rich and the poor

• There is evidence that these social inequities have widespread negative effects at both social and physical levels

• Greater inequity is not just bad for the poor - more unequal societies are bad for almost everyone within them, the well-off as well as the poor

• Almost every modern social and environmental problem - ill-health, lack of community life, violence, drugs, obesity, mental illness, long working hours, big prison populations - is more likely to occur in a less equal society.
Evidence regarding locational disadvantage

- Despite Australia’s recent strong economic growth, some communities remain caught in a spiral of low school attainment, high unemployment, poor health, high imprisonment rates and child abuse.
- This can lead to intergenerational poverty and low educational attainment:

‘… when social disadvantage becomes entrenched within a limited number of localities, a disabling social climate can develop that is more than the sum of individual and household disadvantages and the prospect is increased of disadvantage being passed from one generation to the next.’ (Vinson, 2009).

- The resulting impact compounds disadvantages: disadvantages are cumulative rather than static.
Evidence that locational disadvantages lead to poorer outcomes for children

• The strongest demonstration of the impact of neighbourhoods on children’s development during the early years comes from studies of the Early Development Index (EDI) in Canada and the Australian Early Development Index (AEDI) in Australia.

• Hertzman et al. (2010) report that the EDI results on 5 year old children in British Columbia show that the proportion of variation attributable to neighbourhood socioeconomic characteristics ranged from one fifth to a half on the five dimensions of the EDI.

• For Canada as a whole, there is a more than a 16-fold inequality in developmental vulnerability at the level of the neighbourhood (Hertzman, 2010).
Evidence that ‘social climate change’ has altered the nature of the health and social problems we face

- There have been sweeping social and economic changes in developed nations over the past few decades have significantly altered the conditions under which families are raising young children and in which the children themselves are growing up.

- The impact of social climate change is widespread, affecting communities, families, children and services.

- While many of these changes have been beneficial, others have not been, and the most vulnerable children and families are increasingly marginalised.
‘Social climate change’ (cont)

• One of the key features of the social changes that have occurred is that society has become more complex and interconnected.

• One effect of this increased interconnectedness is to alter the nature of people’s relations with others, as well as the nature of the major social and health problems that are facing contemporary societies.

• The major health problems today are ‘disorders of the bioenvironmental interface’, products of socioeconomic influences on health (such as poverty), health disparities, technological influences on health, overweight and obesity, increasing mental health concerns (Palfrey, Tonniges, Green & Richmond, 2005).
Complex or ‘wicked’ problems

• Many of the most pressing policy challenges involve dealing with very complex or ‘wicked’ problems.

• These problems are ‘wicked’, not in the sense of them being evil in some way, but in the sense of them being complex and difficult to solve. They are contrasted with ‘tame’ problems where the problems are well understood and the solutions known.

• These problems share a range of characteristics:
  - they go beyond the capacity of any one organisation to understand and respond to
  - there is often disagreement about the causes of the problems and the best way to tackle them
  - the problem is not understood until after a solution has been formulated
  - the problem is never solved (completely).
EVIDENCE REGARDING THE EFFICACY OF EFFORTS TO ADDRESS THESE ENVIRONMENTAL IMPACTS
Evidence of the failure of orthodox approaches to reduce inequalities

• The traditional policy response to health inequality is to redistribute existing health and community support services towards socially disadvantaged localities, targeting high-risk groups and improving the coordination of care for those with the most complex needs.

• This kind of health service strategy is a necessary but insufficient policy response to health inequality: improved services cannot influence the upstream social and economic conditions that make people ill in the first place.

• Seeking to alter the individual behaviour of vulnerable people is also ineffective: health promotion campaigns have been successful in changing the lifestyles of more affluent and educated social groups, but have not substantially transformed risk patterns among the poor.
Evidence that local services struggle to respond effectively to the complex needs of vulnerable families and communities

- The service system is having difficulty providing support to all families who are eligible – there are waiting lists for many services.

- Services cannot meet all the needs of families that they do serve - no single service is capable of meeting the complex needs of many families.

- Services are not well integrated with one another and are therefore unable to provide cohesive support to families.

- The current service system was designed at a time when society was simpler and needs to be reconfigured to meet the changing needs of families and communities.
Evidence of difficulties in engaging vulnerable families

• The families that are most disadvantaged by the fragmentation of the service system are those that are most vulnerable.

• These families are often those who make least use of services during the early childhood years.

• This can be because they lack the skills and confidence to negotiate the system, or because they are unfamiliar with the culture and language, or because they are isolated and lack the social networks that would help them find and use the services that are available, or because they have multiple problems and need help from many sources.
A COMPREHENSIVE, COMMUNITY-BASED SERVICE FRAMEWORK
Key features of a comprehensive, community-based service framework

- **Universal** – based on the provision of a core set of services to all families in all localities
- **Tiered** – provision of additional supports to families and areas identified as having additional needs and/or being exposed to multiple risks
- **Integrated** – all relevant services work together to provide integrated holistic support to families
- **Multi-level** – able to address all factors that directly or indirectly shape the development of young children and the functioning of their families
- **Place-based** – integrated services planned and delivered in defined socio-geographic areas

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Key features of a comprehensive, community-based service framework (cont)

- **Relational** – based upon principles and practices of engagement and responsiveness, both at the individual and community level
- **Partnership-based** – based on partnerships between families and service providers, between service providers, and between government and service providers
- **Governance structure** – has a robust governance structure that allows different levels of government, different government departments, non-government services, and communities to collaborate in developing and implementing comprehensive place-based action plans.
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