# Annual Report of the Chief Medical Officer 2012

Our Children Deserve Better: Prevention Pays



Dean Reader

I come from a generation that believed the future would be better than the past; we expected and, in the main, have enjoyed longer, healthier, easier, richer, more comfortable and happier lives compared with our own parents and grandparents. However, our children and grandchildren face a more uncertain future, with a challenging economic outlook and increasingly disproportionate social disadvantage.

We have seen great success in some areas of health, but if we look at our key healthcare outcomes – mortality and morbidity – we see a worrying picture when we look back historically, when we look across the regions of our country and when we compare ourselves with other similar nations. This is particularly true for long-term conditions. And this, despite the enormous efforts of front-line staff in social care, healthcare and education, intense focus by our politicians and increased financial investment.

Yet the science runs ahead and is increasingly clear. There is a growing knowledge of the complex interplay between psychosocial events and biological factors, and we now understand that events that occur as a fetus and in early life play a fundamental part in later life, and indeed in the lives of future generations. This inevitably leads us to the conclusion that early interventions and preventive measures such as immunisation, health checks and education do make a difference to outcomes. If we act early we can prevent harm. To address these issues, we need to take a population health perspective – to think about what benefits the most. Key principles of public health are also fundamental. This means 'proportionate universalism' – improving the lives of all, with proportionately greater resources targeted at the more disadvantaged groups.

The challenge for us as a society is how to harness this evidence and momentum and turn it into improved outcomes for our current and future generations of children and young people. This is not just a moral responsibility but also an economic imperative. For failure to invest in health leads to poorer educational attainment and affects the nation's future productivity.

My report seeks to provide the up-to-date evidence to help to answer these key questions. It lays out the scientific evidence and, crucially, alongside this examines the economic benefits and financial savings from improved health in children and young people. It also identifies that improving health and wellbeing in early life benefits us all – not just through improved health gains but also economically. We need to stop thinking of spend on healthcare for children and young people and instead think of investing in the health of children and young people as a route to improving the economic health of our nation. We need to understand that health plays a powerful role in allowing children and young

people to meet their academic potential, and that academic achievement helps to improve health.

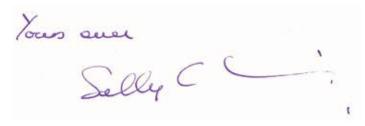
We also need to listen to our children and young people if we are to develop effective strategies to deal with the increasing cost of healthcare. Youth is key to many of these diseases, such as diabetes; either because the diseases begin in adolescence, or because key habits of self-management develop during this crucial phase. Without efforts to engage young people in both disease prevention and management, we will not succeed in reducing their future burden of disease. We have seen considerable improvements over recent years in the numbers of young people smoking or using drugs, but we have yet to see similar gains in the prevalence of healthy behaviours such as meeting physical exercise guidance.

Reducing disease is fundamental but so too is ensuring that our young people are capable of meeting the changing requirements of life. We need to ensure that they are resilient and primed to succeed.

This report lays out a series of recommendations that are grounded in the evidence base. My concern for our current state is such that I am proposing a National Children's Week to focus attention on the health of children and young people. Whilst, there are international precedents for such events in countries with better health outcomes, I am proposing "we look to develop" a National to date there is no evidence of correlation, I believe it is appropriate to undertake this approach in England and evaluate the impact.

As individuals, whether we are parents, grandparents or siblings, we need to ask ourselves about our responsibility to the future for improving our children's health and wellbeing. As policy makers, we need to ask ourselves whether we are shaping our actions to ensure that we allow the next and future generations to be the best they can be. As individuals working within health or beyond, we need to reflect deeply on current practice and identify how we can improve if we are to tackle the problems that we face, such as improving outcomes for long-term conditions. As a society, we need to ask ourselves how we want to spend our resources to deliver the most for our nation's future.

If we want our legacy to be a productive, effective, healthy country, we need to take heed of the evidence base laid out in this report. I commend it to you. And I ask all political parties to take this evidence into consideration as they prepare their manifestos for the next election.



Prof Dame Sally C Davies

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This report could not have been produced without the generous input of the following people and their teams.

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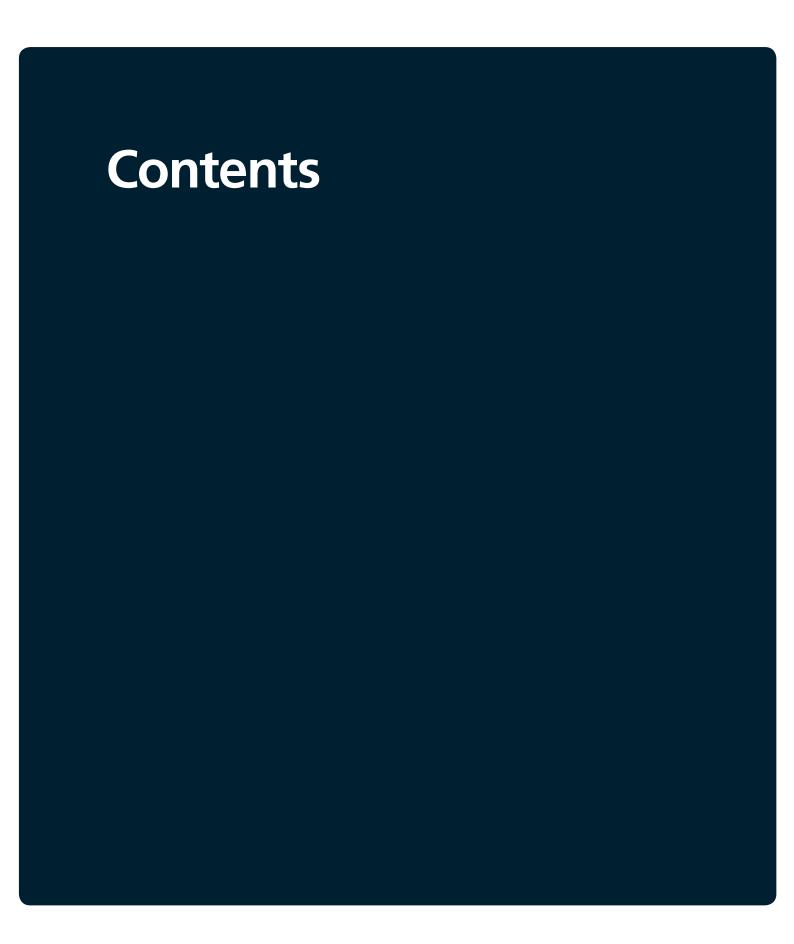
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