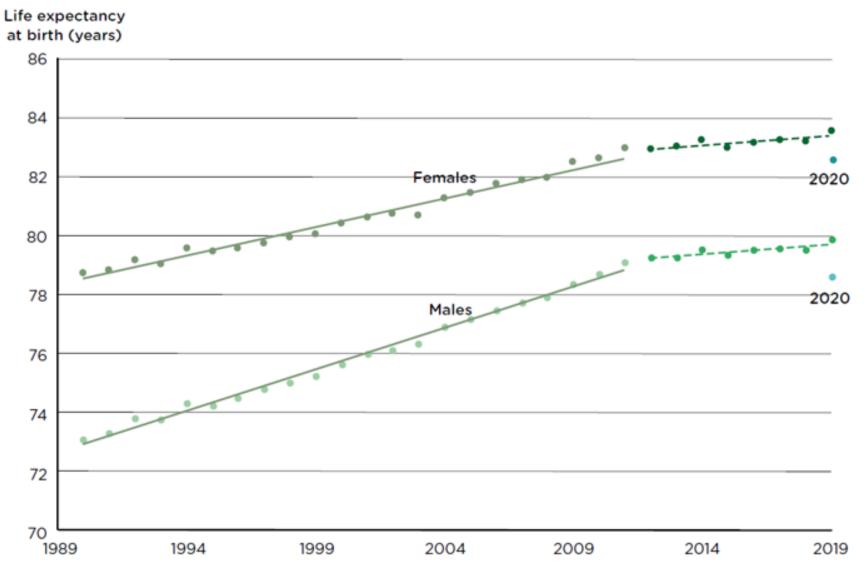


Reducing health inequalities place by place

Dr Jessica Allen
Deputy Director
UCL Institute of Health Equity



Increases in life expectancy at birth stalling in England



Year

Source: Office for National Statistics

Annual life expectancy improvement in weeks, 2011 to 2017

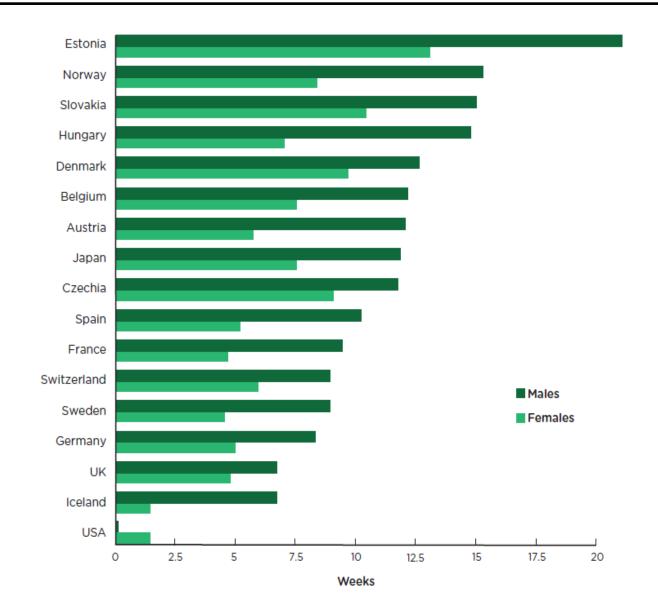
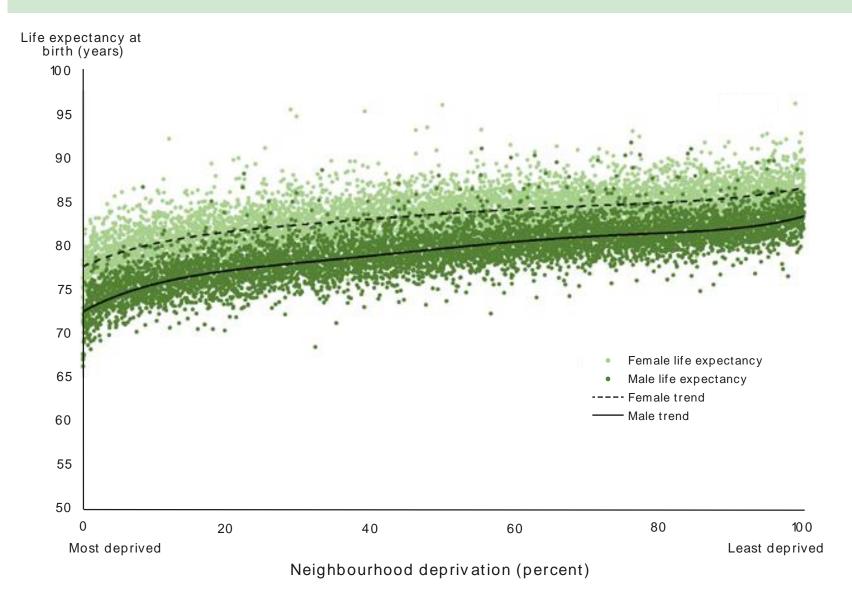




Figure 1.4. Life expectancy at birth for neighbourhoods in England, by sex and level of deprivation, 20 16–20

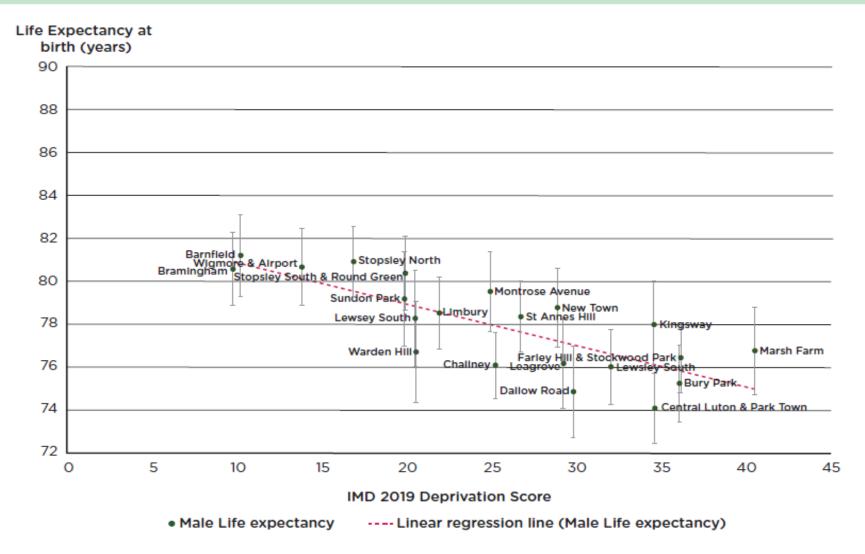




Life expectancy for men and women living in the most deprived FH EQUITY areas of England fell significantly between 2015-17 and 2018-20

Change in life expectancy at birth Females Males 2 months Most deprived Least deprived

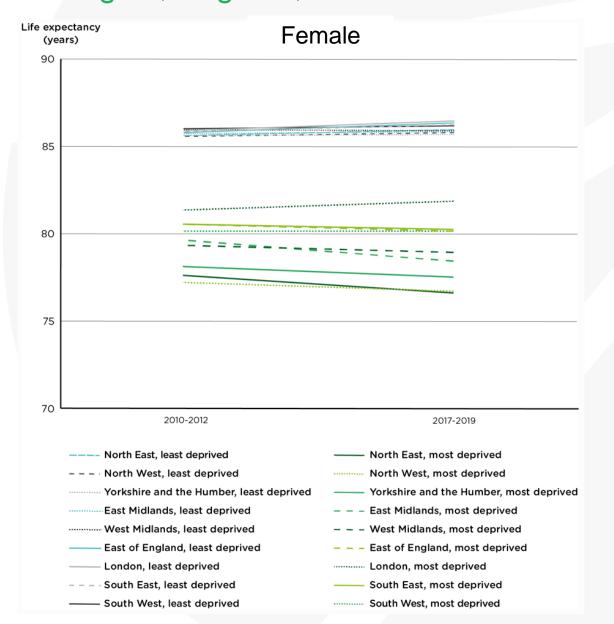
Figure 2. Male life expectancy at birth in Luton, by level of deprivation at local level, 2016-2020

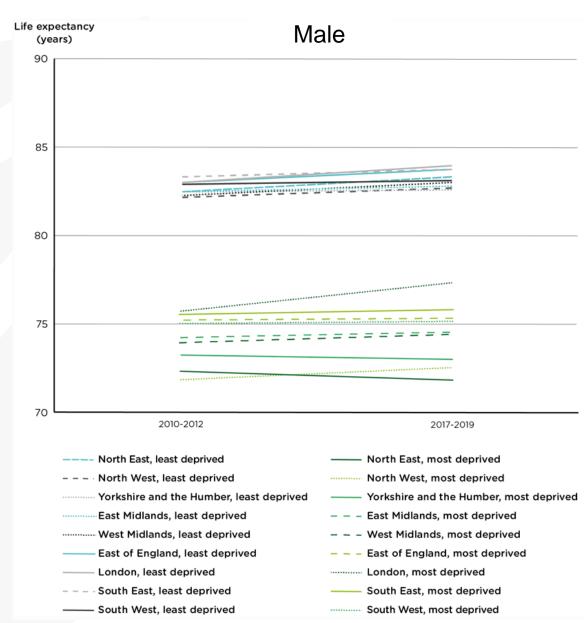


Source: ONS, 2021 (4)

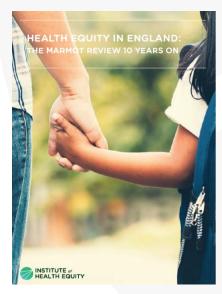
Notes: The data are for IMD 2019 scores of middle layer super output areas (MSOA). R² 0.6152 for the regression line. This the proportion of the variance explained by the variable in the regression model

Life expectancy at birth by sex for the least and most deprived deciles in each region, England, 2010–12 and 2017-19









Marmot Principles

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- 4. Ensure healthy standard of living for all

- Create and develop healthy and sustainable places and communities
- 6. Strengthen the role and impact of ill health prevention
- Tackle racism, discrimination and their outcomes
- 8. Pursue environmental sustainability and health equity together

The health equity system – UK

- Local Government
- Health Care primary and secondary care, Trusts, Integrated Care Systems
- Voluntary and Community sector
- Public services education, criminal Justice, transport
- Business and private sector
- NATIONAL GOVERNMENT AND ORGANISATIONS



Norway, Taiwan, HK

Rapid Review Rapid review of inequalities in health and wellbeing in Norway since 2014

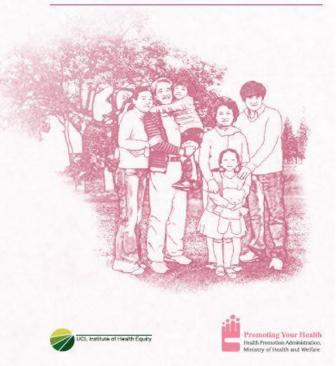






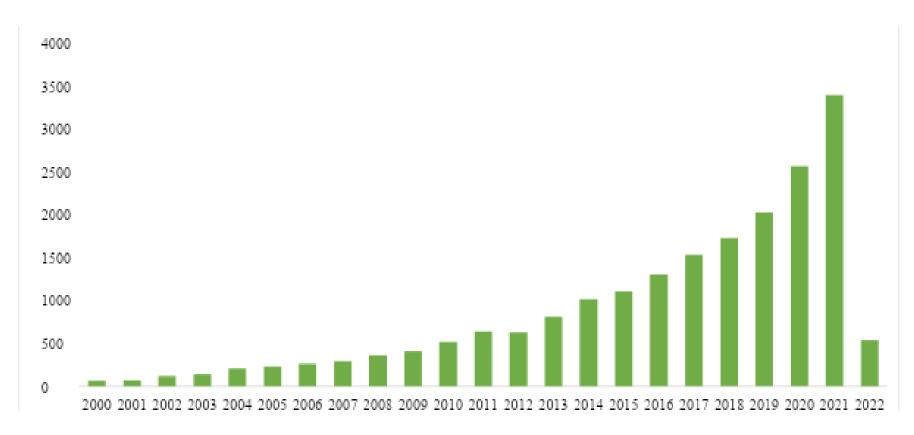








Articles on the social determinants of health by year (PubMed, 2000-2022) N= 17 931





Taking action

Obstacles

- Politics
- Leadership
- Weak partnerships
- Public awareness
- Timescales
- Capacity
- Resources
- Remit

Opportunities

- Leadership
- Politics: Inequalities and social justice
- Strengthening partnerships
- Awareness about the SDH
- Evidence and know how
- Demand and Costs of not doing
- Prevention agenda



Marmot Places – 40+ local authorities

- Coventry
- Greater Manchester
- Cheshire and Merseyside
- Lancashire and Cumbria
- Luton
- Waltham Forest
- Gwent
- Southwest region
- Leeds
- Medway, Fife, Northumberland TBC



Process



Analysing

- Launch
- Advisory group
- Data analysis
- Interview stakeholders
- Workshops / meetings
- Indicator and recommendation development
- Community engagement



Reporting

- Themes
- Marmot 8
- Systems
- Recommendations
- Short and long term
- o 1,2,5 years
- Indicators



Implementing

- Building a movement
- Health equity at the heart of all policies
- Develop cross-sectoral response
- Implementation group
- Monitoring indicators
- Organisational & policy direction
- Convening, advocating and prioritising



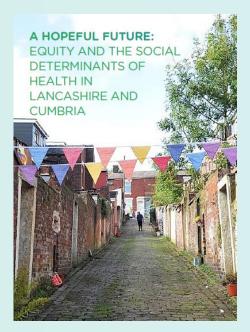
COVENTRY - A MARMOT

An evaluation of a city-wide approach to reducing health inequalities





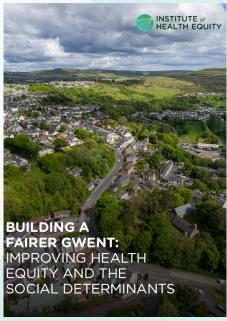






REDUCING
HEALTH
INEQUALITIES
IN LUTON:
A MARMOT TOWN





Public Health, Education, **Libraries & Adult** Learning, Procurement, **Economy and Jobs**











Coventry Marmot Steering Group Partnership working















Progress in Cheshire and Merseyside

- **System wide** Fair employment charters, *All Together Active* focussing on reducing inequalities in physical activity
- Cheshire East Business for Health, piloting workplace health framework
- Knowsley focussing on improving female life expectancy; gambling; planning (restricting hot food takeaways); council paying adult social care providers real living wage
- St Helens reviewed borough's inclusive growth strategy
- Halton explore opportunities for social value from local businesses with recent success - helping to change procurement practices
- Sefton focussing on child poverty
- Liverpool focussing on housing, income, climate change



Embedding Marmot principles into local strategies

ICS and ICP plans

Lancashire and South Cumbria, Cheshire and Merseyside

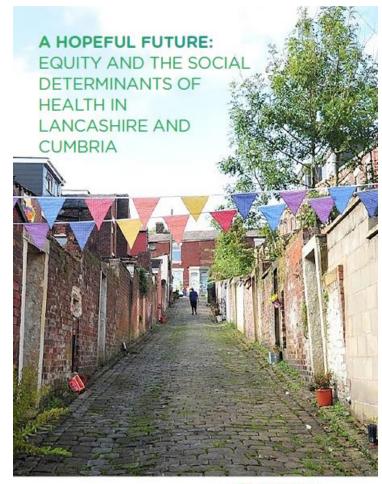
Sefton Child Poverty Strategy

- 'Prospects' networking and linking with universities and Further Education colleges to develop collaborative and evidence-based approach.
- Working with housing associations, communities and children's hospital to reduce effects of cold homes



Lancashire and Cumbria

- 2021-2023 (into 2024)
- Launch, Analysis, Report
- Recommendations embedded into both ICB plans
- Improved relationships and structures – public and population health; stronger public health collaborative
- Blackpool Trust Health inequalities plan
- No budget in ICB seen as 'change enablers', working with NHS staff to enable to reduce inequalities within their work, make inequalities "everyone's business"

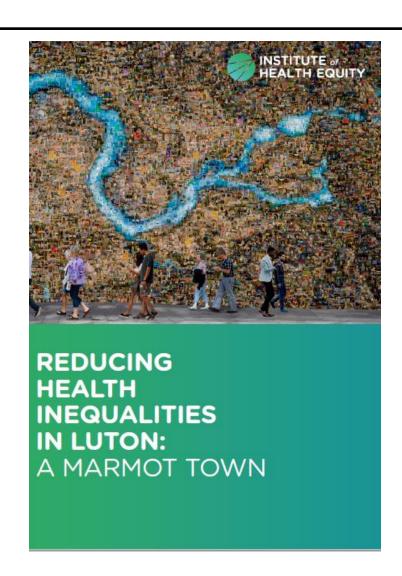






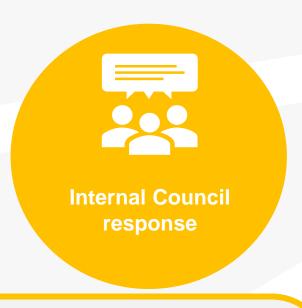
Luton

- 2021-2022
- Launch, Analysis, Report
- Assessing impacts and evaluation report
- Raising awareness
- Strengthened partnerships
- Culture and leisure services
- East London Foundation Trust
- Community and Leisure services





Waltham Forest





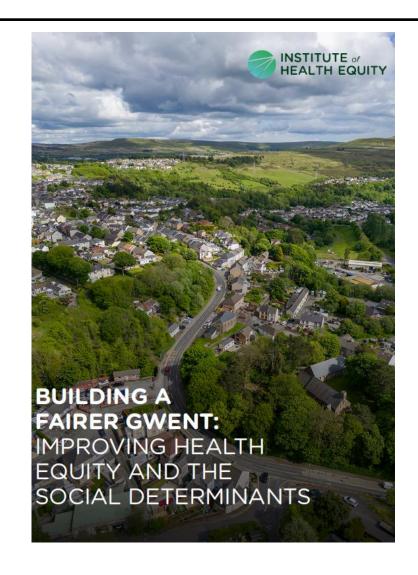


Developing a WF roadmap setting out work we're already doing and work we have planned to tackle health inequalities across the borough. Continuing to work with partners across the health, voluntary and community sector towards achieving our vision of a fairer and healthier borough.

Partnering with the King's Fund as critical advisors in supporting us to build a place-based system of health equity.

Gwent

- 2022 **-** 2023
- Launch, Analysis, Report
- First in Wales
- Lack of actions and results since devolution in 1999 – recommend shift from wellbeing to addressing inequalities
- Existing statutory partnerships challenged to be more effective
- Many great policies but lack of delivery and lack of resources





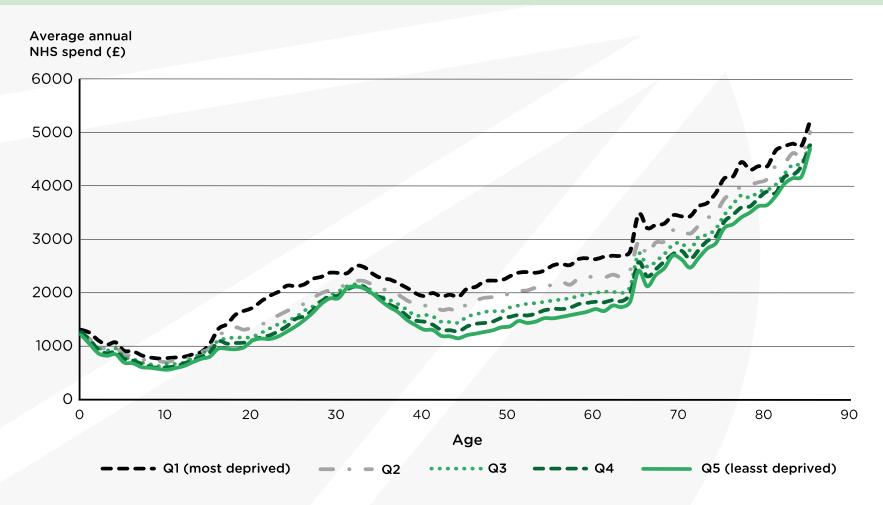
Factors for success – Leadership Post-report

Leads

- Coventry Public health and across the local authority and public services
- Cheshire and Merseyside Public Health and Liverpool City Region
- Lancashire and Cumbria Population Health ICS
- Luton Public health
- Waltham Forest Public health
- Gwent Public health and Public Services Board (part of Future Generations Act, made up of local authorities/NHS/voluntary and statutory sectors)



Figure 4.3b. Average annual NHS spend by age and neighbourhood deprivation quintile group for males in England, 2011/12



Source: Asaria (392)

ELFT's Marmot Mountains: Universal & targeted actions to reduce health inequalities

Promote access to employment & apprenticeships at ELFT for SUs and other disadvantaged groups

Healthier Wealthier Families pilot

Improving language and communication development – family literacy & digital inclusion

Engage with young people to raise aspiration and promote access to healthcare careers

Bring meaningful employment & apprenticeship opportunities to local people

Engage with employers to advocate for good quality work & mentally healthy workplaces

ELFT as an organisation

Our service users & their families

The wider community

Examples of work at ELFT mapped to Population Health Strategic Objectives



Prioritise children and young peoples' emotional, physical, social and learning development

 Piloting welfare and financial advice in our children's clinical services - £110k funding secured. So far 70K in unclaimed benefits for families using our specialist childrens services

Support service users, carers and the communities we serve to develop skills and access meaningful activity and good quality employment

 Over 200 service users recruited by ELFT over the past two years

Support service users, carers and our communities to achieve a healthy standard of living

 61% of our 491 suppliers pay the Real Living Wage, compared to 22% two years ago. Increased pay and better T&C's for our contracted staff.

Contribute to the creation of healthy and sustainable places, including taking action on climate change

5% year-on-year energy reduction targets for all ELFT sites

Champion social justice and fully commit to tackling racism and other forms of prejudice

 Grant funding issued to voluntary and community sector organisations for projects to address inequalities. In Luton this has resulted in 32 VCS projects being funded £1.6m

Prioritise prevention and early detection of illness in disadvantaged groups

 NHS England Early Implementer site for tobacco control for people with severe mental illness (SMI)



Working with business

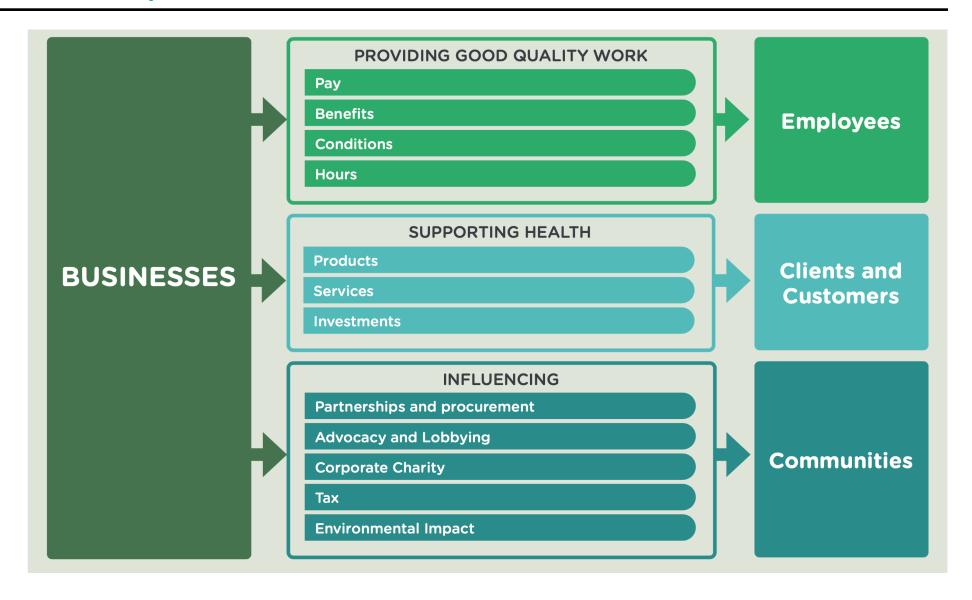






THE BUSINESS OF HEALTH EQUITY:
THE MARMOT REVIEW FOR
INDUSTRY

How businesses shape health: IHE framework





Hidden workers



- Legal and general improving conditions for their hidden workforce
- Working across city to get companies on to do the same
 - Price Waterhouse Cooper
 - Grosvenor Hotel
- Sick pay
 - Launch coalition for fairer sick pay conditions autumn 2023



Other areas

- Children and young people collaborative Barnardos
- Structural racism and Health GLA
- Role of developers and place shapers
- Cold homes
- Skills programmes
- Cost of living
- Inclusive Economies
- Leeds, Southwest







The Health Equity Network

Register for the Health Equity Network here: http://bitly.ws/zh2g

or scan this QR Code with your phone camera:



www.instituteofhealthequity.org

