

Promoting Health and Wellbeing in Lancaster

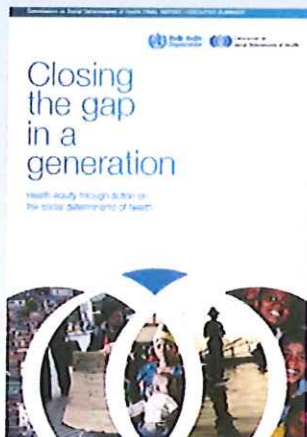
8th October 2014

Dr Mike Grady.

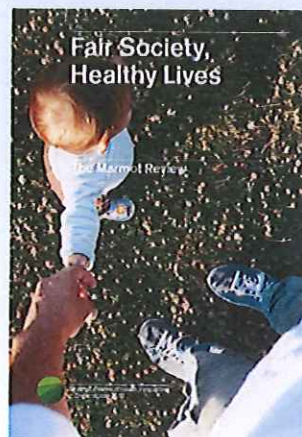
Institute of Health Equity,
University College London.



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The CSDH – closing the



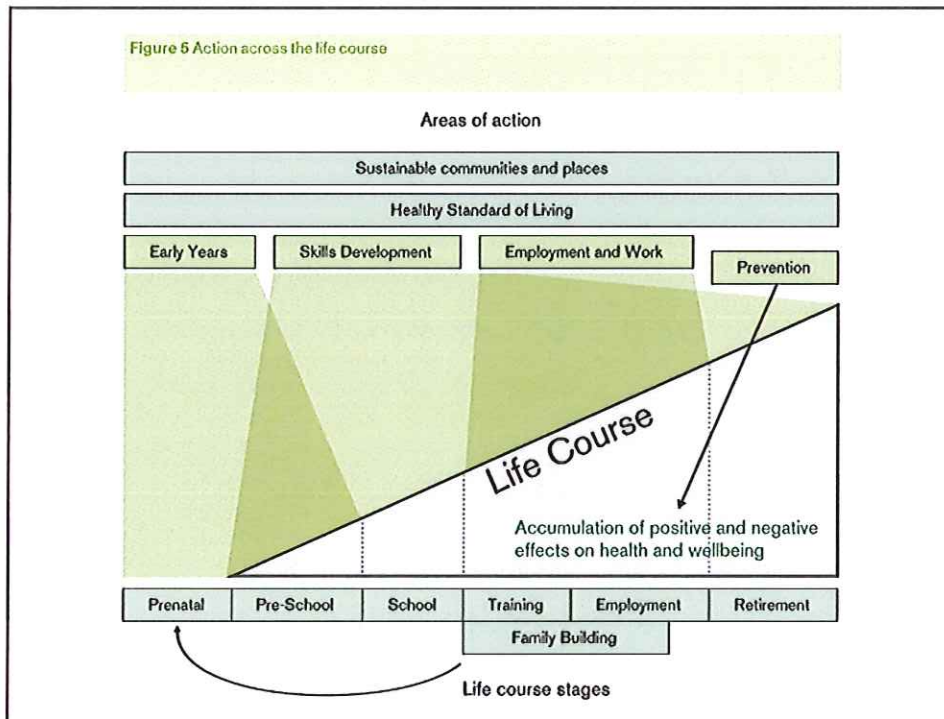
The Marmot Review – Fair

Review of the
Social
Determinants
of Health and
the Health
Divide in the
WHO
European
Region



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Policy Objectives: The Social Determinants of Health

- A. Give every child the best start in life
- B. Enable all children, young people and adults to maximise their capabilities and have control over their lives.
- C. Create fair employment and good work for all
- D. Ensure a healthy standard of living for all
- E. Create and develop healthy and sustainable places and communities
- F. Strengthen the role and impact of ill-health prevention

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Life expectancy

- The difference in life expectancy at birth between the most and least deprived areas in England has dropped marginally from 7 years to 6.8 for females, and from 9.6 years to 9.2 years for men, between 2008/10 and 2010/12.
- Inequalities in life expectancy are significantly worse for men than for women.** For males, there are 36 local authorities with a gap between the most and least deprived areas, of 10 years or more, and 8 local authorities where the gap is greater than 10 years for females.
- For males, there are 6 local authorities with a gap of 5 years or less, and for females there are 50 local authorities where the gap is 5 years or less

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Healthy life expectancy

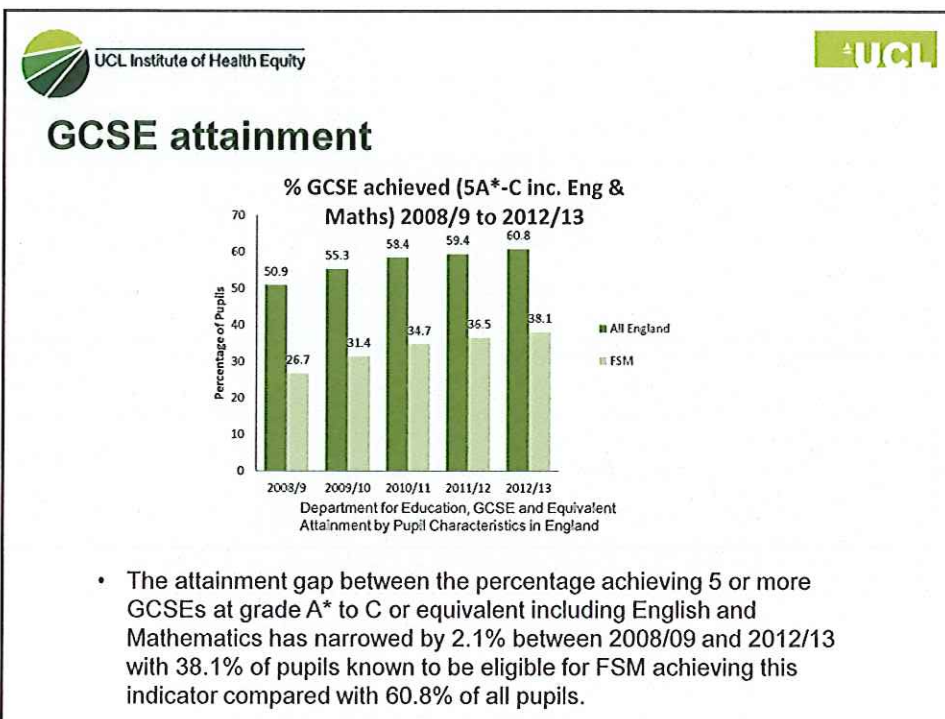
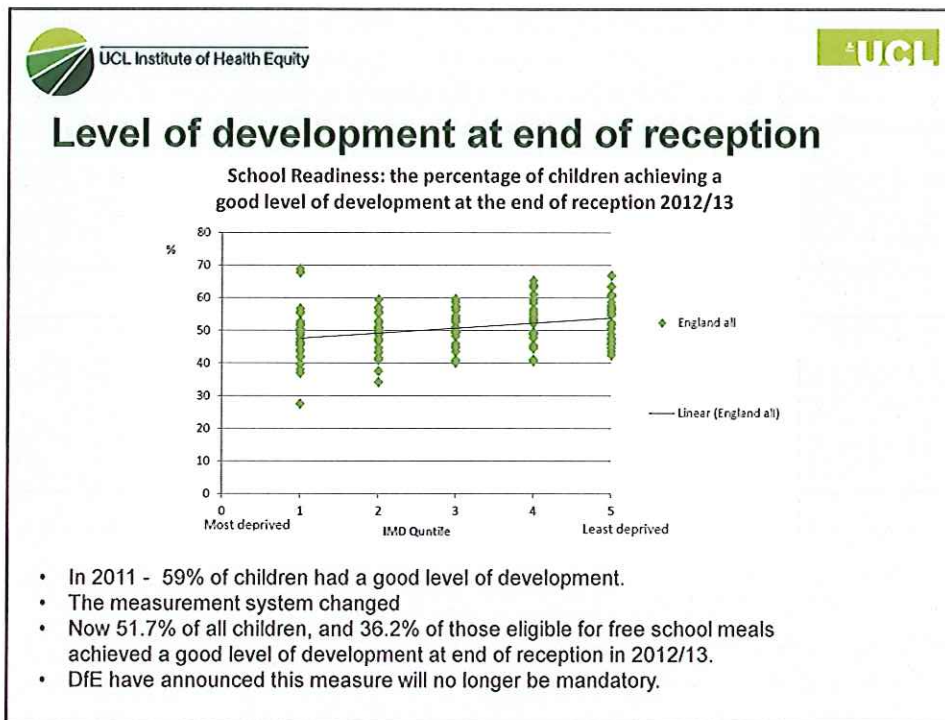
Life expectancy and healthy life expectancy at birth females 2010-12, by IMD deprivation quintile

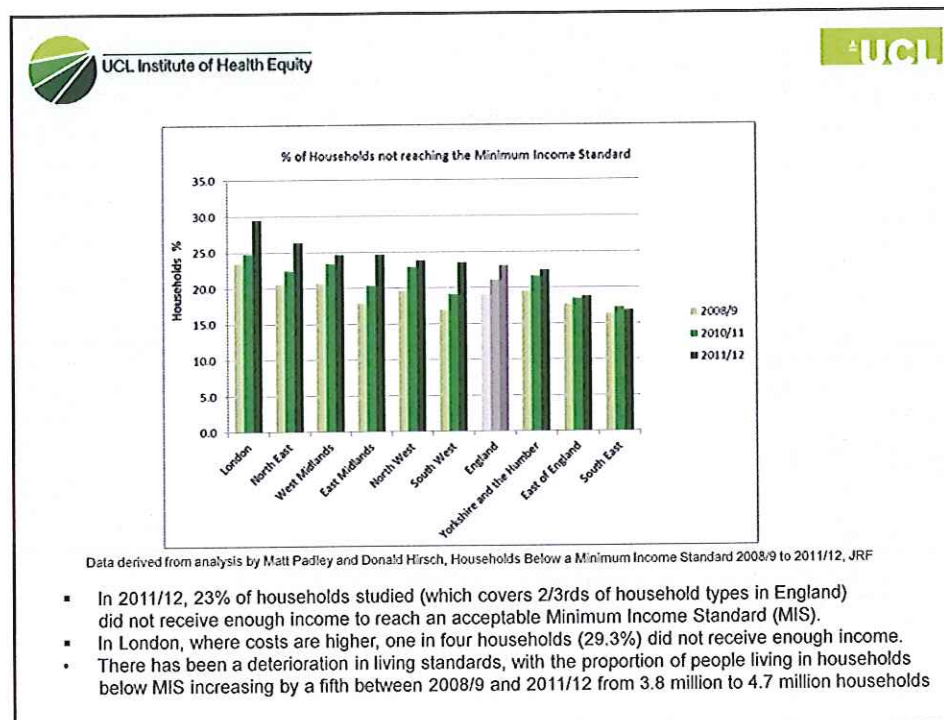
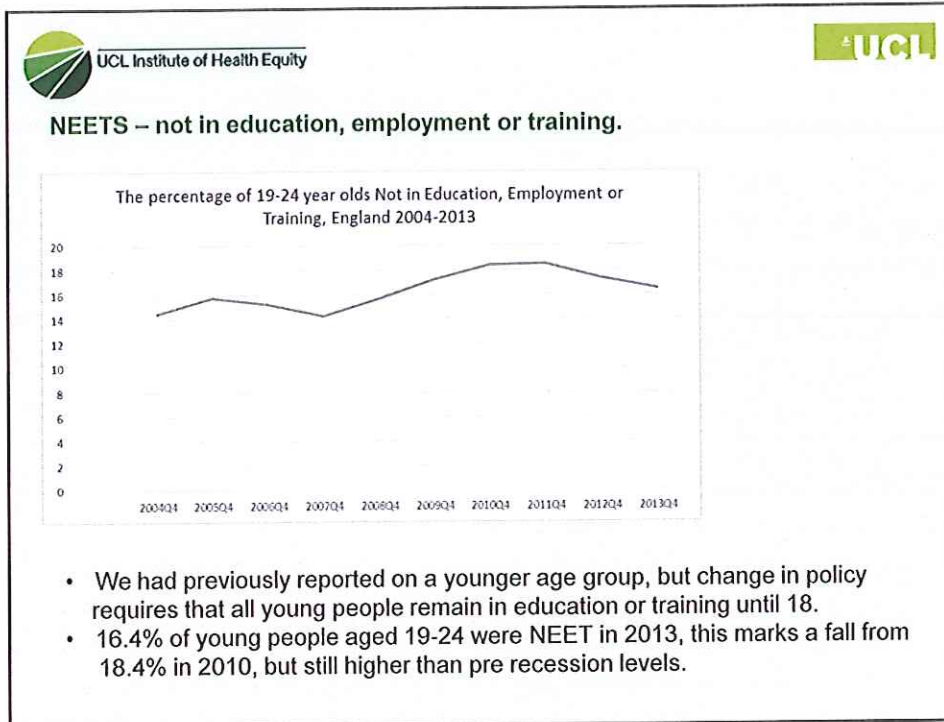
● Healthy life expectancy at birth - females ● Female LE at birth

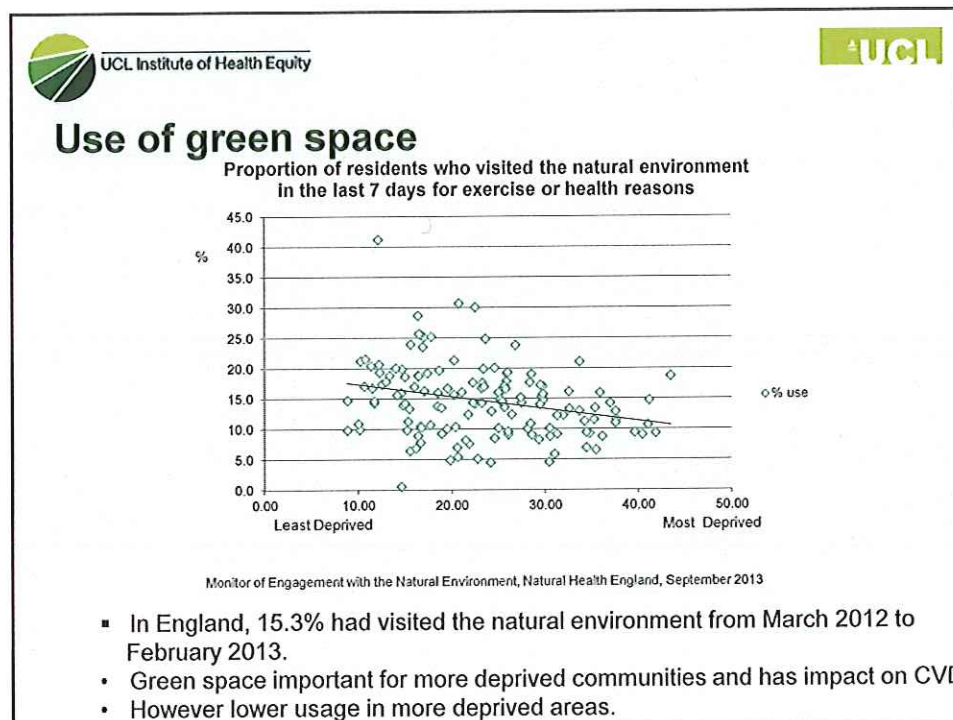
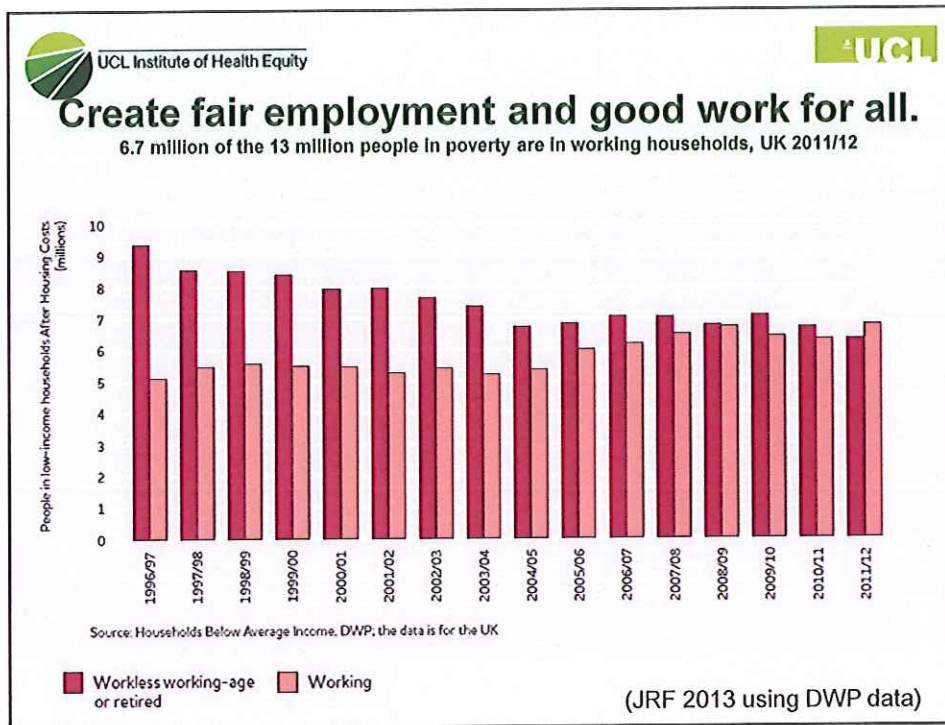
Life expectancy and healthy life expectancy at birth, males, 2010-2012, by IMD deprivation quintile

● Life expectancy at birth - males ● Healthy life expectancy at birth - males 2010-12 years

- The calculation for healthy life expectancy has changed to be based on a survey rather than the census.
- On average, women can expect to live until 64.1 years, and men to 63.4 in good health.
- Inequalities in healthy life expectancy are greater than for life expectancy
- For men, there is a 17.5 year gap between the area with the highest and lowest health expectancy, and for women a 15.5 year gap.
- There is particularly high level of variation in healthy life expectancy *within* deprivation level, those performing less well should learn from those performing well







People and Places

- Critical linkage of health, wellbeing and resilience.
- Evidence of linkage of low level stress, depression and exclusion are barriers to participation.

" You can see the deprivation, all you have to do is look outside. Its in your face every day, litter everywhere, rats and rubbish. It's a dump.....it feels like people around you have no meaning to life. I keep my curtains closed at times....It doesn't give you a purpose to do anything" (Focus group participant)

- Many communities are characterised by lack of mutual trust, isolation and under developed social cohesion.



Strategic Review of Health Inequalities
in England post-2010

Health, Wellbeing and resilience

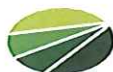
- Evidence participation and improving life skills ameliorates impact of health inequalities through developing social support networks. (Bynner and Parsons 2006)

- Learning and skill development impact positively and fosters community action.

" I know what makes me healthy and that is being happy and having friends" (Susanne)

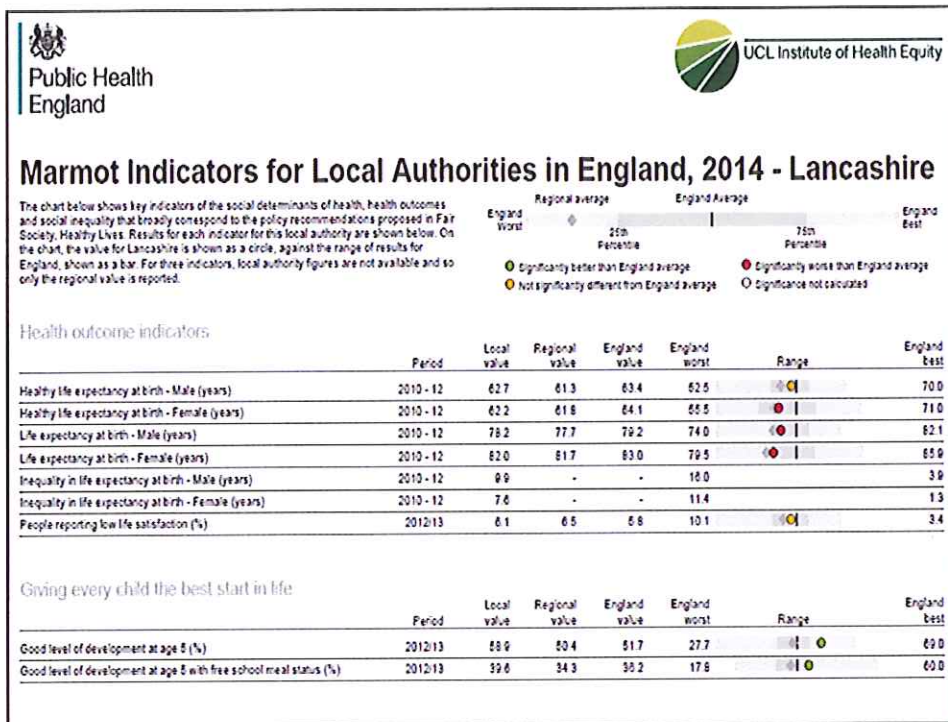
- Social networks create the conditions in which people thrive

" I would say that people in the group have more confidence. At one point they would have been sat at home doing nothing ,now they are out and are involved. Once you get there it 's amazing to see how far you can go." (Joyce)





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Enabling all children, young people and adults to maximise their capabilities and have control over their lives

	Period	Local value	Regional value	England value	England worst	Range	England best
GCSE achieved 5A*-C including English & Maths (%)	2012/13	61.3	59.9	60.8	43.7		81.9
GCSE achieved 5A*-C including English & Maths with free school meal status (%)	2012/13	31.4	30.5	33.1	21.6		76.7
19-24 year olds not in education, employment or training (%)	2012/13		18.1	16.4			


Create fair employment and good work for all

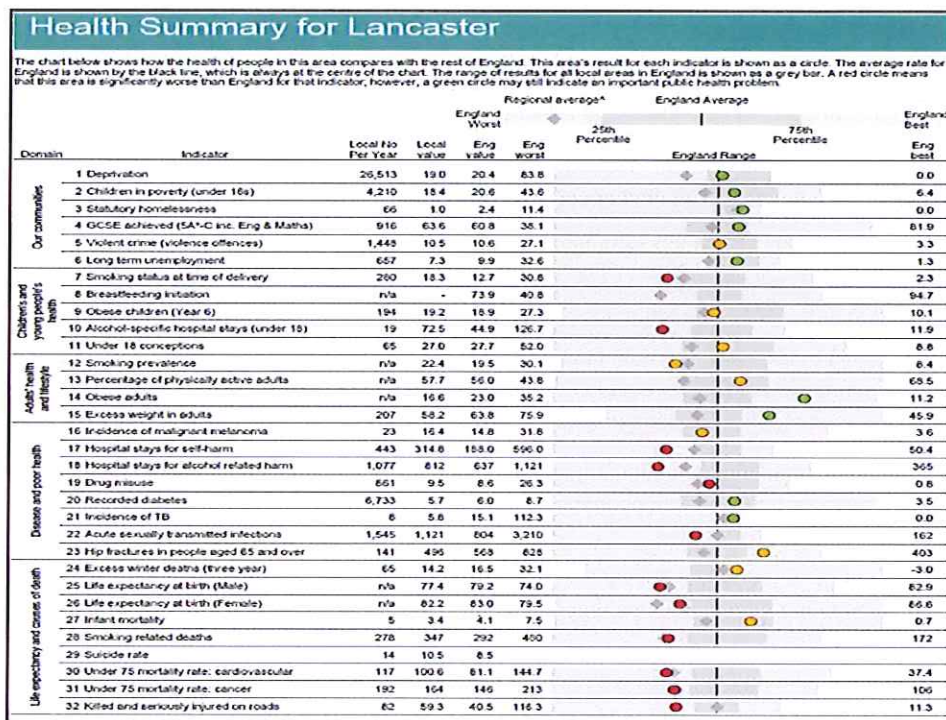
	Period	Local value	Regional value	England value	England worst	Range	England best
Unemployment % (ONS model-based method)	2013	6.0	8.0	7.4	14.4		3.2
Long term claimants of Jobseeker's Allowance (rate per 1,000 population)	2013	7.2	11.2	9.9	32.8		2.3
Work-related illness (rate per 100,000 population)	2011/12		330.0	354.0			

Ensure a healthy standard of living for all

	Period	Local value	Regional value	England value	England worst	Range	England best
Households not reaching Minimum Income Standard (%)	2011/12		23.8	23.0			
Fuel poverty for high fuel cost households	2012	10.8	11.3	10.4	21.3		4.9

Create and develop healthy and sustainable places and communities

	Period	Local value	Regional value	England value	England worst	Range	England best
Utilisation of outdoor space for exercise/health reasons (%)	Mar 2012 - Feb 2013	14.2	15.0	15.3	0.5		41.2

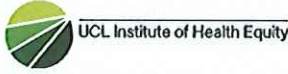



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Key messages

- Inequalities in life expectancy at birth are not significantly different and there are a number of factors that will be hampering progress to reduce inequalities and improve people's lives.
- Clear inequalities evident in children's development, difficult to know if this is worse because DfE keep changing the measures.
 - Improvement in early years provision, parenting support, reduction of child poverty
 - Stable measures of development to help track progress.
- Nearly a quarter of households do not have enough money to live on and this has been increasing. More than half of those in poverty are in work.
 - Government to identify policy lead for ensuring sufficient incomes, with plan of action.
 - Employers to take responsibility for ensuring that work pays sufficiently.



Other key messages

- **Inequalities worse for men than women**
 - More focus on men's health needed

- **North/south divide**
 - More investment in the north, focus on affordability in the south.

- **Unemployment higher than pre recession levels and five fold increase in JSA claimants on for longer than 12 months.**
 - Action to support all members of society into good work.

- **Significant regional variation**
 - Learn from variation - poorly performing local authorities to learn from local authorities with similar deprivation levels who are doing better.
 - Local authorities to utilise evidence based practices, see evidence briefings IHE authored for PHE.

What works

	Health Equity Evidence Reviews	Health Equity Briefings
Early intervention	1. Good quality parenting programmes and the home to school transition	1a. Good quality parenting programmes 1b. Improving the home to school transition.
Education	2. Building children and young people's resilience in schools 3. Reducing the number of young people not in employment, education or training (NEET) 4. Adult learning services	2. Building children and young people's resilience in schools 3. Reducing the number of young people not in employment, education or training (NEET) 4. Adult learning services
Employment	5. Increasing employment opportunities and improving workplace health	5a. Workplace interventions to improve health and wellbeing 5b. Working with local employers to promote good quality work 5c. Increasing employment opportunities and retention for people with a long-term health condition or disability 5d. Increasing employment opportunities and retention for older people
Ensuring a healthy living standard for all	6. Health inequalities and the living wage	6. Health inequalities and the living wage
Healthy environment	7. Fuel poverty and cold home-related health problems 8. Improving access to green spaces	7. Fuel poverty and cold home-related health problems 8. Improving access to green spaces
	Implementation and Impact: Health Equity Briefings	
	9. Understanding the economics of investments in the social determinants of health	10. Tackling health inequalities through action on the social determinants of health: lessons from experience

Creating conditions in
which individuals and
communities have control
over their health and lives
and
participate fully in society



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