

## Introduction to the PHE Health and Wellbeing Directorate

## **Our mission**

Our work saves lives, promotes wellbeing and creates environments where individuals, families, and communities can feel informed, empowered, healthier and happier.

# Our approach

We take an integrated approach to promoting health and wellbeing. We work with a range of partners to develop and implement robust, effective health programmes and to address the social factors that affect people's health. The key elements of our approach are:

## Improve health

We work with local government and the NHS to protect and improve health and wellbeing and to help people make healthier choices. We work to reduce health inequalities so the poorest and most poorly benefit most.

#### **Empower the public**

We work with partners to inform, educate, and empower people and communities, especially those in greatest need. We help people to take more control of their health and the things that affect their health.

#### **Build a committed workforce**

We work across the system to develop a robust public health workforce that is knowledgeable, capable, and effective at improving health, promoting wellness, and tackling health inequalities.

#### Use the evidence

We champion science and look to put research into practice – we always call on the best available evidence when advising, developing and implementing high-impact strategies to improve health outcomes.

#### Tackle health inequalities

We build partnerships and engage a wide range of stakeholders to help address health inequalities and influence the factors that affect the public's health.

## Our public health priorities

PHE is prioritising its efforts to achieve meaningful and measurable results quickly in a few key areas of public health, which we can tackle effectively and with known strategies. By setting out clear strategies and targets, and by working with public health partners, we can reduce health inequalities and lessen the overall burden of these diseases and conditions.

### 1. Wellbeing and mental health

Mental illness accounts for 23% of all ill-health in England and affects more than one in four of the population at any time. Good mental health is linked to good physical health, education, employment, and reduced crime and antisocial behaviour. We aim to expand access to services, improve the public uptake of promotion and prevention programmes, and prioritise measures that have the greatest public impact. PHE will work with the NHS, local authorities and other partners to help more people have good mental health, improve the physical health and wellbeing of those with mental illness, and ensure few people as possible suffer avoidable harm.

## 2. Diet, obesity and physical exercise

Poor diet, obesity and lack of exercise are all major causes of cardiovascular disease (CVD) and cancer. Poor diet accounts for one third of deaths from cancer and CVD. Lack of exercise increases the risk of CVD, and colorectal and breast cancers. Obesity increases the risk of type II diabetes, hypertension and colorectal cancer in men. We are making progress in these areas by supporting national and local initiatives to give people healthy choices that are easy and affordable, This includes improving the food in schools, hospitals, and workplaces; reducing salt in processed and restaurant food; and improving opportunities for safe physical activity.

## 3. Smoking

Smoking accounts for 20% of new cases of cancer. Every year, tobacco causes nearly one in five deaths in England. For each death, 20 more people develop tobacco-related illnesses. Effective interventions include cessation programmes, tax increases, smoke-free policies, media campaigns and advertising restrictions.

## 4. Alcohol and drugs

Alcohol and drugs are cross-government issues. The costs of drug and alcohol misuse are similar to smoking and obesity but come more from crime. Drug-related crime is mainly acquisitive while alcohol-related crime is mainly violence and social disorder. Our first goal here is to prevent risky behaviour and to help people stop misusing these substances.

#### 5. HIV and sexual health

More than 100,000 people in the UK were living with HIV/AIDS by the end of 2012. Over half of those living with HIV in the UK were diagnosed late and this means their outcome may not be as positive as if their infection was diagnosed at an earlier stage.

Around half a million new sexually transmitted infections (STIs) were diagnosed in 2011 (a 2% rise from 2010). Among those most affected are young men and women, men who have sex with men, and ethnic minority groups

The key things we can do to tackle this increase include; screening people for HIV/STI infections, early treatment, notifying partners so they can be tested, social marketing campaigns, providing access to condoms and promoting their use, and policies to address stigma and discrimination.

# Life-course perspectives

PHE will focus its health improvement efforts on the life course, which means combining prevention and early intervention to support people as they pass through life's major transitions. This has five key benefits. It:

- promotes an holistic approach that sees the individual's total health and wellbeing needs
- encourages an asset-based approach that understands risk factors and the importance of the family as a protective factor
- focuses on outcomes and draws from the evidence base
- concentrates on prevention and early intervention, which includes reducing health inequalities and preventable mortality
- views public health as one agency for improving health and wellbeing outcomes.

Expert advisors will help PHE to develop, implement and monitor public and personal health and wellbeing across the five key stages of life. They will also help PHE to promote the value and effectiveness of this approach to our partners and stakeholders.

#### 1. Healthy infants, children and youth

Focus on improving health and outcomes for mothers and infants, children, teens and young adults.

### 2. Healthy adults and older adults

Help all people, and especially those at risk from health inequalities, to live a long and healthy life.

#### 3. Healthy people in healthy places

Ensure the places where people live, work, learn, and play protect and promote their health, especially for those at greater risk of health inequalities.

#### 4. Healthcare public health

Support sound decision-making and policy changes within the NHS that deliver, evaluate and improve effective clinical preventive services that drive public health.

## 5. Health in all policies

Inform and support the Department of Health and other government partners in sound decision-making and policy changes at all levels to deliver and evaluate programmes and to address the social factors that affect health.

## Our programmes

- Alcohol and drugs
- Cancer screening
- Dental public health
- UK National Screening Committee and other screening programmes
- National health marketing campaigns
- NHS Health Check
- Nutrition and healthy food
- Offender health
- Public mental health
- Tobacco
- Sexual health
- Wellbeing and mental health

# **Our publications**

- Falling Drug Use: The impact of Treatment (6 March 2013)
- Alcohol Treatment in England 2011-12 (17 Jan 2013)
- Parents with drug problems: how treatment helps families (6 December 2012)
- Club Drugs Emerging Trends and Risks (14 Nov 2012)
- Substance misuse among young people 2011-12 (1 November 2012)
- Drug treatment 2012: progress made, challenges ahead (4 October 2012)
- NHS Breast Screening Programme 2012 Annual Review
- NHS Cervical Screening Programme 2012 Annual Review
- Screening in the UK 2011-12: Policy Review
- Screening in England 2011-12
- <u>Updated: The Handbook for Vascular Risk Assessment, Risk Reduction and</u> Risk Management (2012)
- National Mental Health Implementation Framework (2012)
- Lord Bradley's review of people with mental health problems or learning disabilities in the criminal justice system
- The Patel report: Reducing drug-related crime and rehabilitating offenders
- Prevention of infection and communicable disease control in prisons and places of detention