



Due North: Inquiry into Health Equity for the North Interim response to the independent inquiry report

Purpose

This document forms Public Health England's (PHE) initial response to the Due North report into Health Equity for the North. It describes the actions we are taking now to improve health equity and sets out the steps we will take in responding to the suggested actions and recommendations for PHE within the report. It also describes how we intend to engage in discussion and debate with a wide range of stakeholders on the Inquiry evidence, analysis and recommendations and use this to inform our more detailed response and our thinking about future work.

Background

That health inequalities exist and persist across the north of England is not news but that does not mean they are inevitable. The Marmot Review in 2010 demonstrated how we need to work across places, communities and organisations to deliver fairer health. By and large, the causes of health inequalities are the same across the country. It is the severity of these causes that is greater in the north, contributing to the observed regional pattern in health. It also marks out the north as a good place to start when inquiring into what can be done about social inequalities in health.

PHE exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. The move of public health into local government offers new opportunities for the public health system to work more effectively with local colleagues and leaders to act on those health inequalities, which may be caused by the wider determinants of health – such as housing, employment, education – rather than lifestyle alone.

Due North report: a northern perspective on a nationwide issue

As a new national body, we are seeking to understand better what has the greatest influence on health; we have worked with partners to set up Health Equity North (HEN) a collaborative venture exploring the potential of collective approaches, across sectors to achieve a step change in the health and wellbeing of communities across the north of England. This was spurred, in part, by the launch of the PHE Longer Lives website in June 2013 which clearly and graphically demonstrated the scale of the health issues and health inequalities affecting the population of the north of England.

We commissioned the independent inquiry report to contribute to the evidence base on the socio economic determinants of health and provide fresh insight and understanding of health inequalities for the north of England. The report builds on three elements of the Marmot Review – a fair start for children, democratic and community empowerment and the economy and welfare. The report provides additional evidence on what actions are needed to tackle the underlying determinants of health on the scale needed to make a difference.

While the Due North Report is from and about the north, the issues discussed, the analysis and recommendations are of interest to every area and to the country as a whole. The report sets out a series of strategic and practical policy recommendations that are supported by evidence and analysis. The report sets out four high level recommendations:

- tackle poverty and economic inequality within the north and between the north and the rest of England
- promote healthy development in early childhood
- share power over resources and increase the influence that the public has on how resources are used to improve the determinants of health
- strengthen the role of the health sector in promoting health equity

The focus of the recommendations and supporting actions are for policy makers and practitioners working in the north of England, for national government and for the NHS. Eight supporting actions directly relate to PHE (Appendix 1).

The report lays down a significant challenge to local areas, communities, businesses, councils, and national political leaders, as well as PHE, about the actions which could make the definitive disruption to these longstanding inequalities in health. The challenge is wide-ranging in its scope and will require consideration by, and discussion with, the many actors that have a role to play in this. While many of the recommendations lie outside the role and control of PHE, we are committed to working closely with partners to initiate constructive dialogue around the responses that this report will naturally stimulate.

What is PHE already doing?

Inequalities in health mean unnecessary loss of life, poorer health, damaged lives and afflicted families. PHE is committed to working with national and local government as well as a wide range of interested partners to identify ways to achieve better life chances and level up the gradient of ill health. PHE current action on health inequalities:

1. PHE has established a programme of work on reducing inequalities in health All of PHE's programmes of work must support the reduction of health inequalities. We are weaving actions on inequalities into all our priority programmes and making sure we do not inadvertently widen inequalities
2. PHE publishes data on health inequalities on a regular basis. It monitors improvement in health outcomes and health inequalities for England, for every local area where possible, using the indicators of the [Public Health Outcomes Framework](#) (PHOF). This includes monitoring the two overarching indicators on inequalities, in life expectancy and in healthy life expectancy. PHE has also disaggregated the PHOF indicators by equalities characteristics and dimensions of inequality, where available, and publishes these regularly. More inequalities data are added with every quarterly data update
3. The [Health Inequalities Segment Tool](#) helps local areas to understand the causes of death that drive inequalities in life expectancy in their area. PHE is currently updating this tool to provide more recent data and information on the contribution of specific behavioural risk factors to inequalities in health. This tool will be updated later in 2014
4. Translation of the recommendations of the Marmot Review is a key plank of our actions on inequalities. Working with the Institute of Health Equity (IHE) PHE will shortly be publishing a suite of eight evidence reviews and 12 related briefings on a range of topics to support local areas to translate the Marmot Review's findings into practical action. The evidence and briefings on specific topics will be supported by two implementation and impact briefings: one on 12 steps, learned from experience, for implementing a social determinants approach and one that provides some understanding on the economics of investment in this approach. In 2014/15 there will be release of further reviews and briefings from IHE and PHE on additional topics relating to action on social determinants of health and health inequalities
5. Changes in outcomes on inequalities also require a change in ways that communities are engaged in working on and planning with local statutory and voluntary sector providers to reduce health inequalities. We have established an approach called [National Conversation on Health Inequalities](#) that includes advice on good practice and the production of engagement tools to support local engagement. We will be promoting further action to engage communities at local level nationwide to build on local assets to reduce inequalities. We will work also with national stakeholders on specific dimensions

of health inequalities such as health inequalities relating to BAME communities or faith communities, where national action can set a direction of travel that can help local areas

6. PHE is exploring how national and local players can best act on the need to embed health equity concerns into specific policy areas that can impact on health, such as spatial planning and housing. We will present learning and guidance on this later this year
7. Through the Health Equity North collaborative PHE will continue to work with northern stakeholders on health equity. We are looking at the potential to establish a northern hub for work on mental health and wellbeing. The hub would support the development and implementation of public mental health priorities in relation to health equity.

Looking ahead

Due North will help to inform the way PHE and others better understand the impact socioeconomic conditions have on health and the priorities for action. We want to reflect more thoroughly on the evidence, analysis and recommendations presented in the report including the eight supporting actions specifically for PHE.

As we do this, we will be mindful of the fact that our role is to support and advise local and national government on the evidence-based interventions which improve the public's health and address health inequalities, and that our advice should be focused on the areas where PHE can make a unique contribution and add most value. We recognise that we do not have the expertise to assess the effectiveness of economic and social policy more broadly.

Over the next three months, we will initiate and support widespread discussion with stakeholders, particularly with organisations in the North. We will then publish a full response to the report's recommendations for PHE in spring 2015, informed by this dialogue, setting out how it will feed into our programme of action on health inequalities. We hope it will be a stimulating and valuable contribution to the on-going debate about how best to secure and sustain the economic and social health and wellbeing of people and places in the north, as well as across the rest of the country.

September 2014

Published in this format November 2014

© Crown copyright 2014

Re-use of Crown copyright material (excluding logos) is allowed under the terms of the Open Government Licence, visit www.nationalarchives.gov.uk/doc/open-government-licence/version/2/ for terms and conditions.