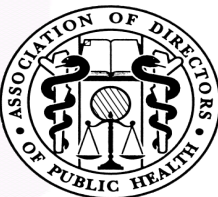


Levelling up and Health Inequalities: what does the future hold?

East Midlands Signature Event
8 June 2023, Leicester

Jim McManus, D.Sc, FBPSS, CPsychol, CSci, FFPH
President, Association of Directors of Public Health
Hon Vice-President, CIEH
Director of Public Health, Hertfordshire County Council



The next two years or so?

- Microbial uncertainty – viral volatility
- Structural and economic inequalities across UK
- Health inequalities across UK
- Living with Covid - Long Covid impacts - enduring for some
- Cost of living squeeze for many
- Tough choices
- Social Un-safety
- A false choice between “woke supremacy” on one hand and aggressive populism harnessing “othering” as a tool for culture war on the other
- Economic challenges
- An atmosphere of vulnerability, threat and uncertainty
- The social gradient to most of these



Jean-Claude Larchet

PETITE THÉOLOGIE
POUR LES TEMPS
DE PANDÉMIE



[Petite théologie pour les temps de pandémie \(editions-syrtes.com\)](http://editions-syrtes.com)

Multiple impacts but it's not all down to covid

- La Pandémie...a surprisé, désorienté et désorganisé dans toutes leurs structures tous les pays du monde” (Larchet, 2022)
- shattered assumptions about certainties especially science
- Shattered reality
- Psychological



**BUTStop
blaming the
pandemic as
the root of all
evil – that's
ideological, not
evidential**

- Mental health need was rising before the pandemic, it has accelerated
 - Suicides have not risen – the main risk for suicides is economic difficulties we are now entering
- inequalities that existed before Covid worsened during it
- Obesity was rising, it has accelerated
- Social divisiveness was increasing due to cultural and political factors
- The Americanisation of Catholic culture wars
- THE NHS
 - waiting list was 4.4m in December 2019, it grew worse during the pandemic but was already a record
 - NHS Vacancies were running at 100,000 before Covid
- Public Health had been cut by 25% before Covid

The System

NHS

- Went into covid with 100,000 short workforce, and 4 m waiting list
- Now 6 million waiting list
- Resignation continues , last quarter saw highest ever NHS resignation figures
- Continuing Healthcare increasingly difficult to get
- Funded nursing care difficult to get
- Health Budgets

Social Care

- Workforce haemorrhaging because supermarkets pay more than frontline care
- Social care underfunded
- Gap in Local Authority funding getting worse
- Politics is about NHS and not seeing the detail in social care
- Care rationing by eligibility criteria
- Means Testing
- Direct Payments

Some key trends

Economic inactivity due to long term ill health has increased significantly

There is a social gradient across all health outcomes, however you measure them

Life expectancy has plateaued for most, worsened for some

Infectious diseases are BACK, big time!

More people are spending the last third of their life in avoidable life-limiting illness and disability though this is improving

Suicides are down, depression and anxiety up

The causes of preventable death have changed, we have new prevention challenges

Significant variation across wards and districts

Access to health care variable, quality of health care variable

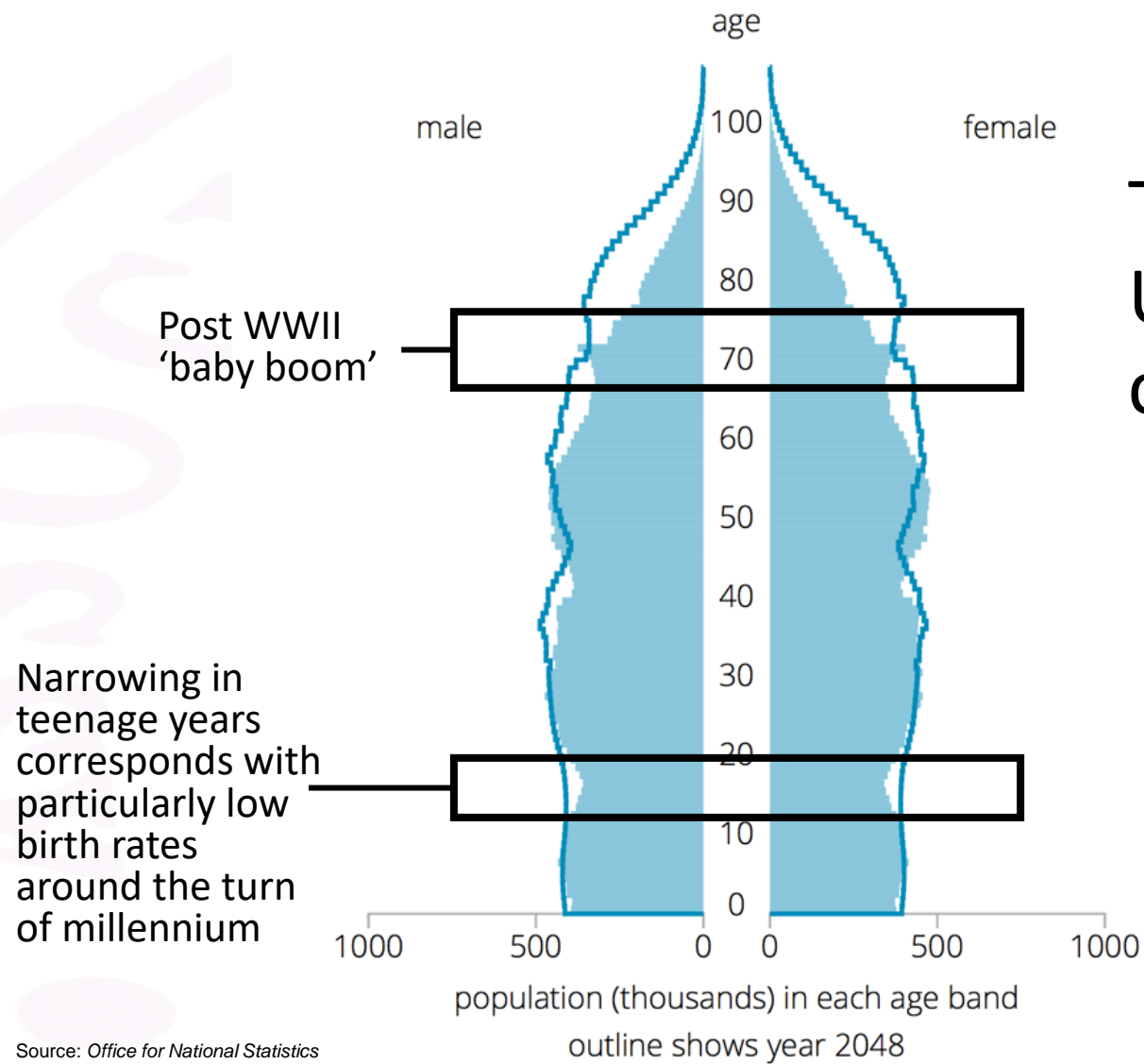


Healthy Economy, Healthy Population

- Growth falsely pitted against Health they both require each other
- Still a £30bn hole in public finances in 2025?
- American style political fragmentation?
- The gaps are widening between richer and poorer and between North and South
- UK biggest drop of life expectancy outside US

Healthcare

- Not the only producer of health
- Cannot meet the burden of health need
- Prevention investment focused in a clinical lens is not the biggest solution



Source: Office for National Statistics

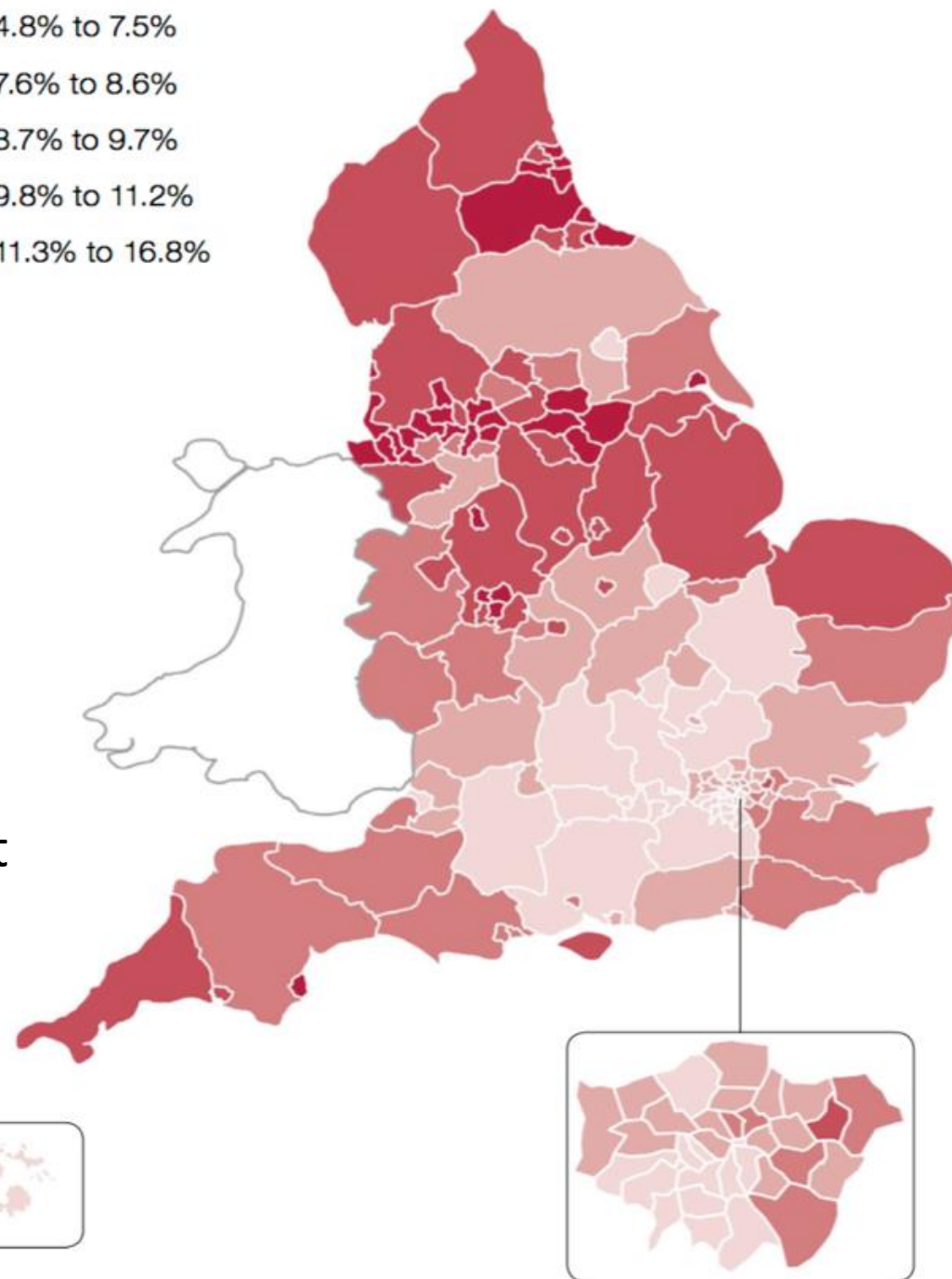
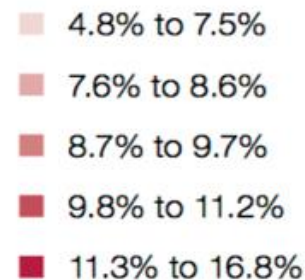
The shape of the UK population is changing

While the UK's population is growing, improvements in healthcare and lifestyles means it is also getting older. In the UK, the number of people aged 85 is projected to double to 3.2 million in the next 23 years.



And the proportion of adults with major limitations on their day-to-day activities varies by region

Need is highest in the North East and North West



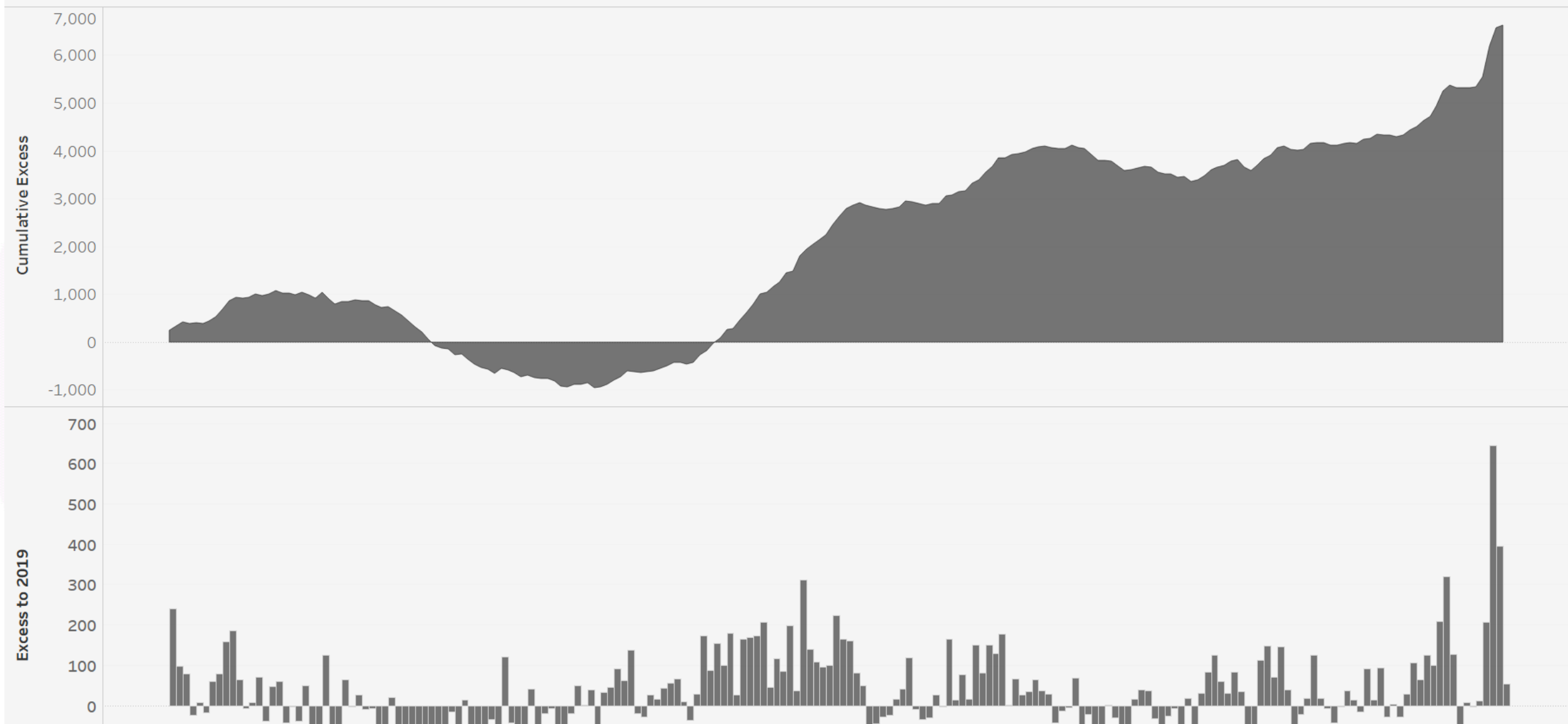
Source: NAO analysis of ONS 2011 census data

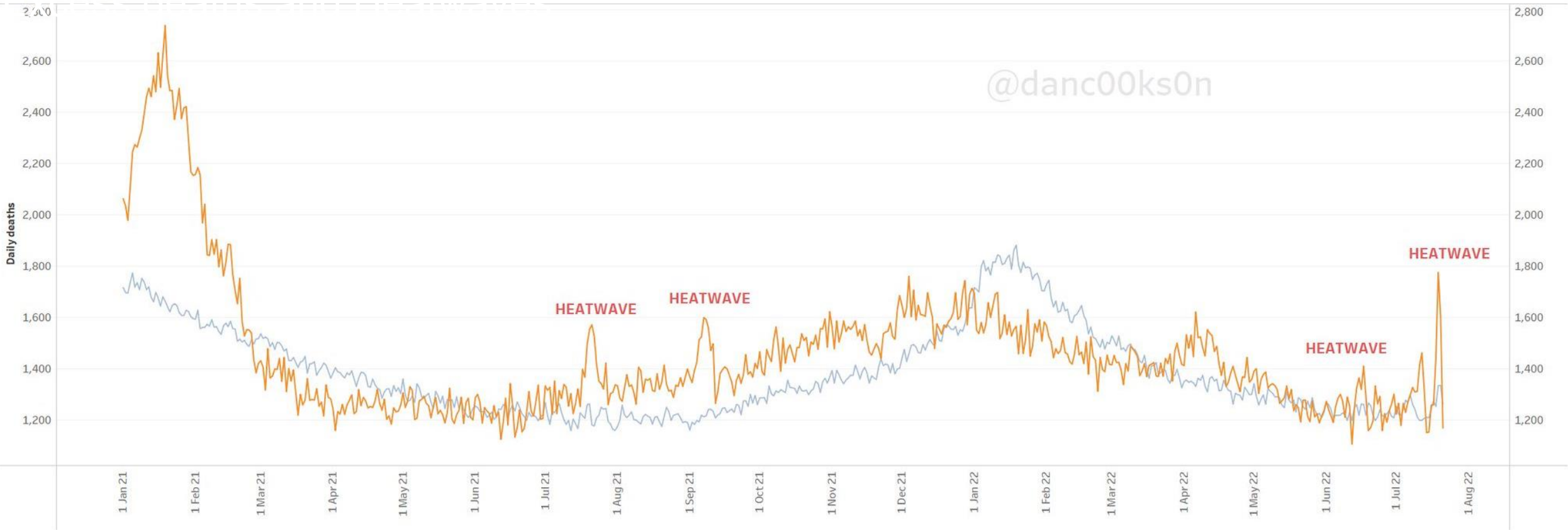
Cumulative and Daily Excess Deaths occurring from 1 January 2022 to 21 July 2022 in England

Data: ONS Monthly series published <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/monthlymortalityanalysisenglandandwales>

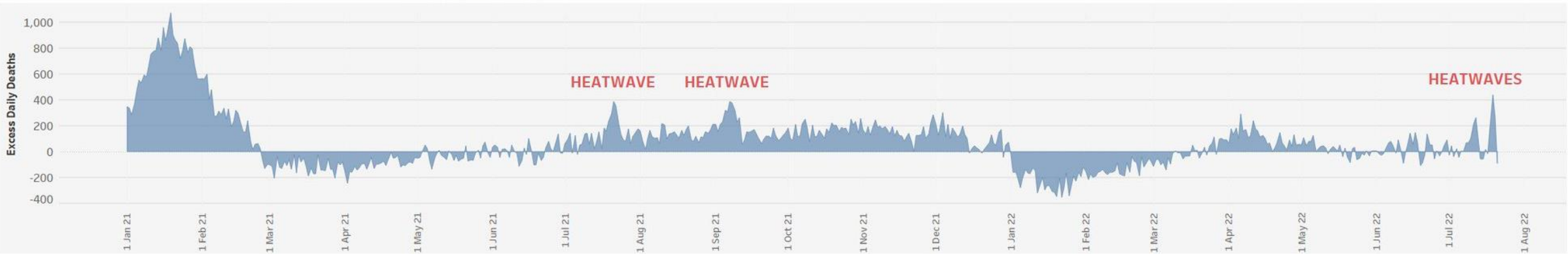
Chart: Dan Cookson @danc00ks0n

Excess Daily deaths = Difference between Daily All causes & 2019

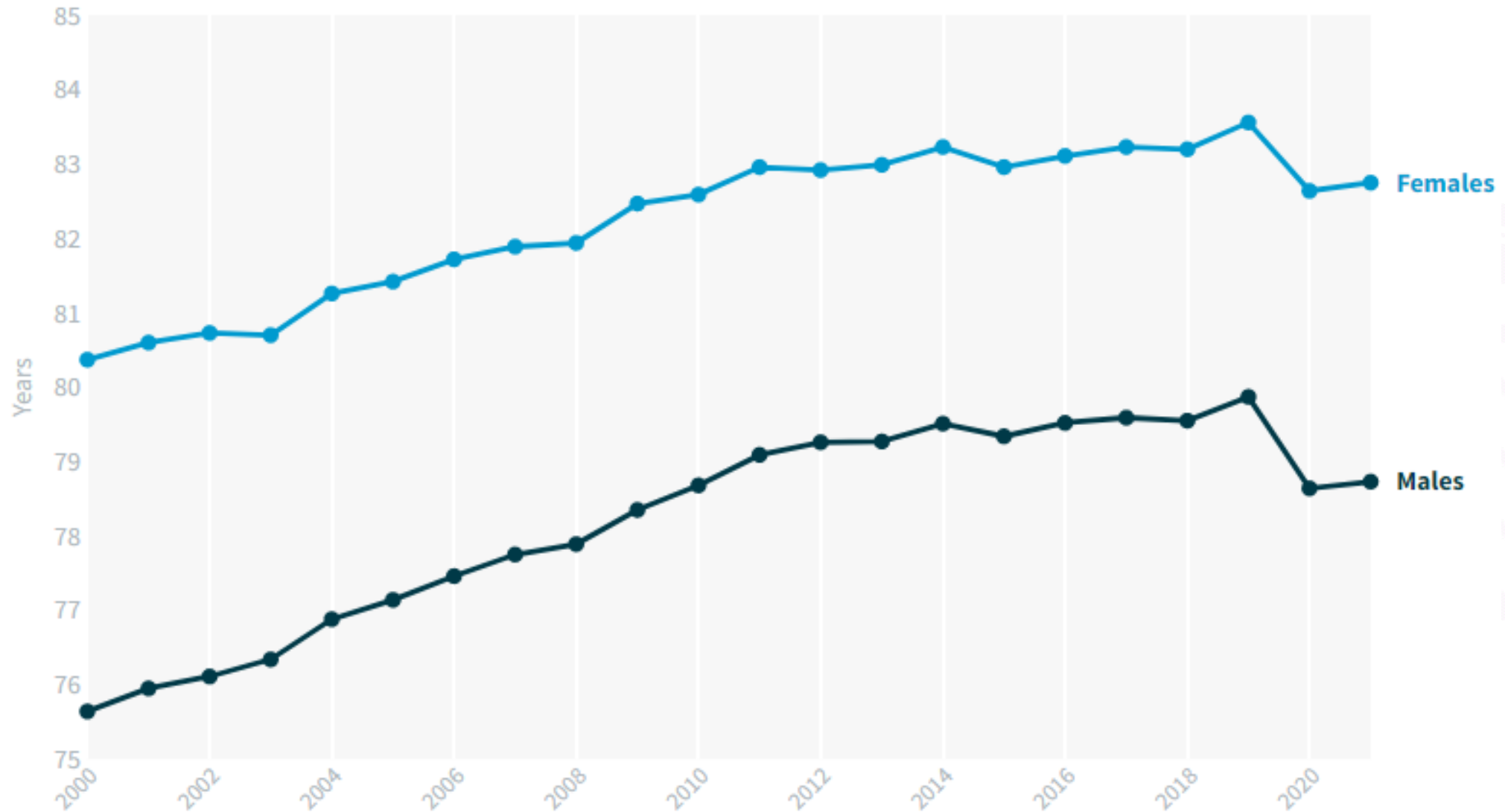




Excess Daily deaths = Difference between All causes & 5 year average (2015-2019)

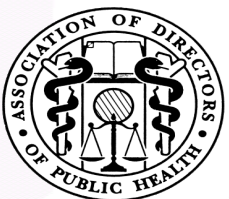


Life expectancy at Birth, England 2000-21

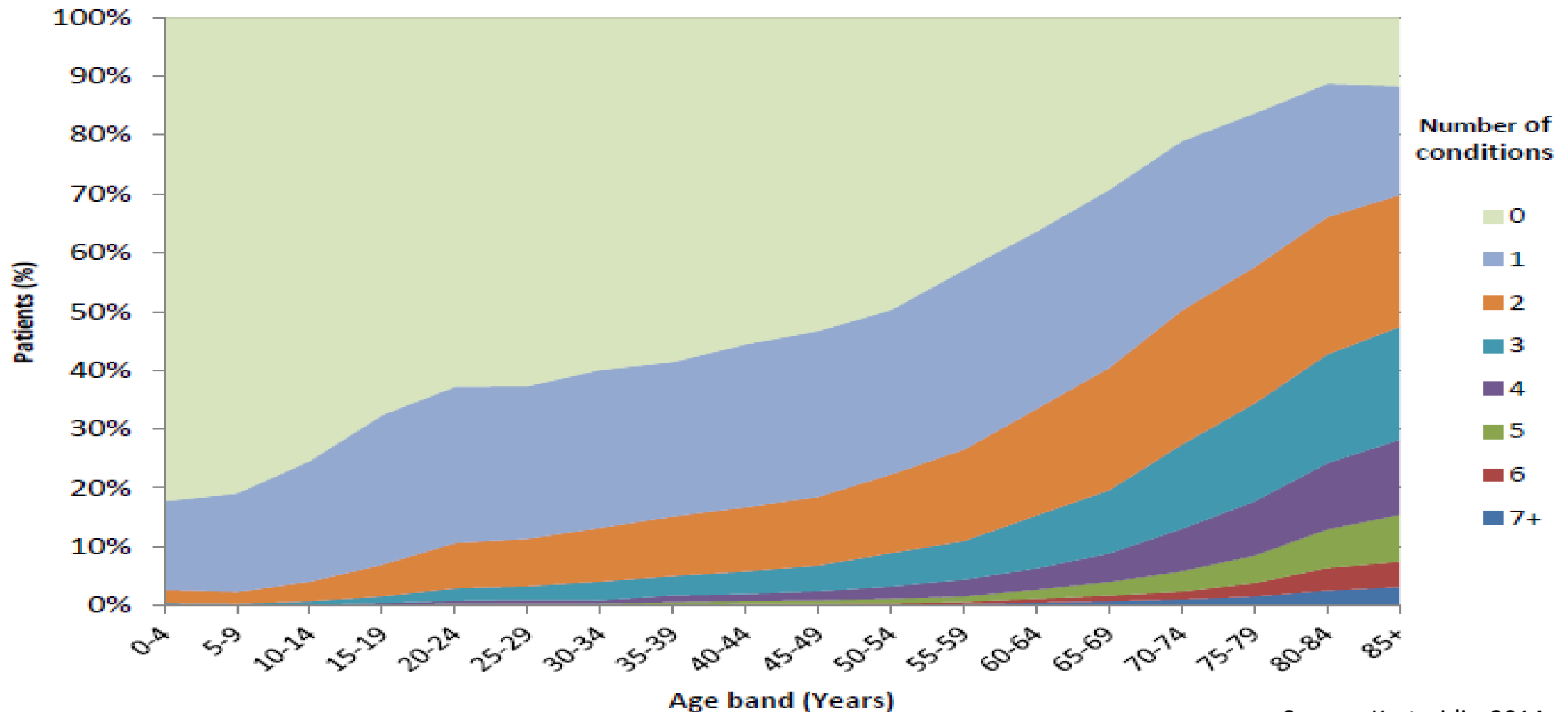


Source: [ONS \(2000-2020\)](#), [OHID \(2021\)](#)

TheKingsFund

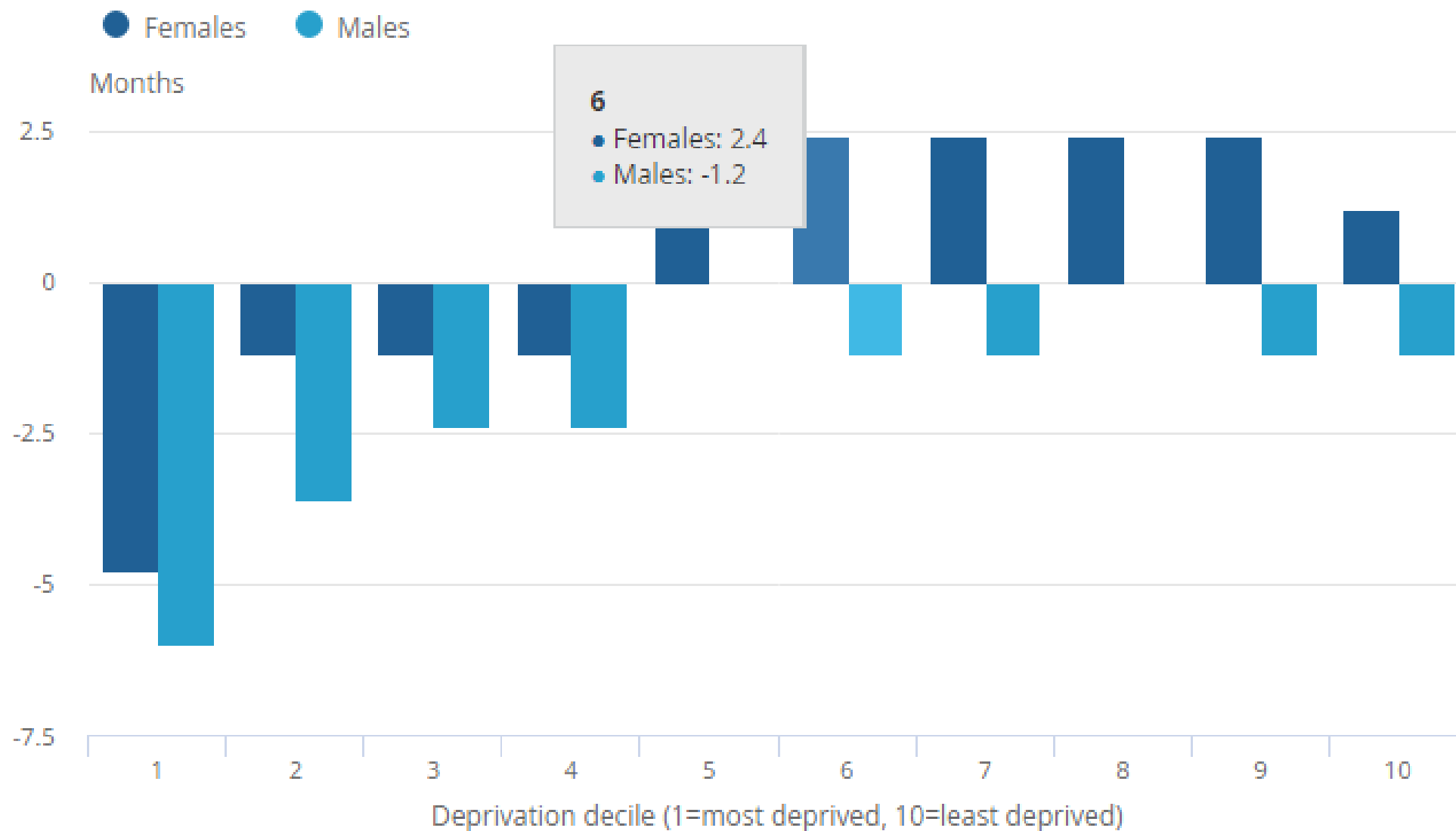


Thanks to life expectancy gains, the number of people living with complex needs is rising



Source: Kasteridis, 2014

Changes in life expectancy by deprivation decile, 2015-2017 and 2018-2020



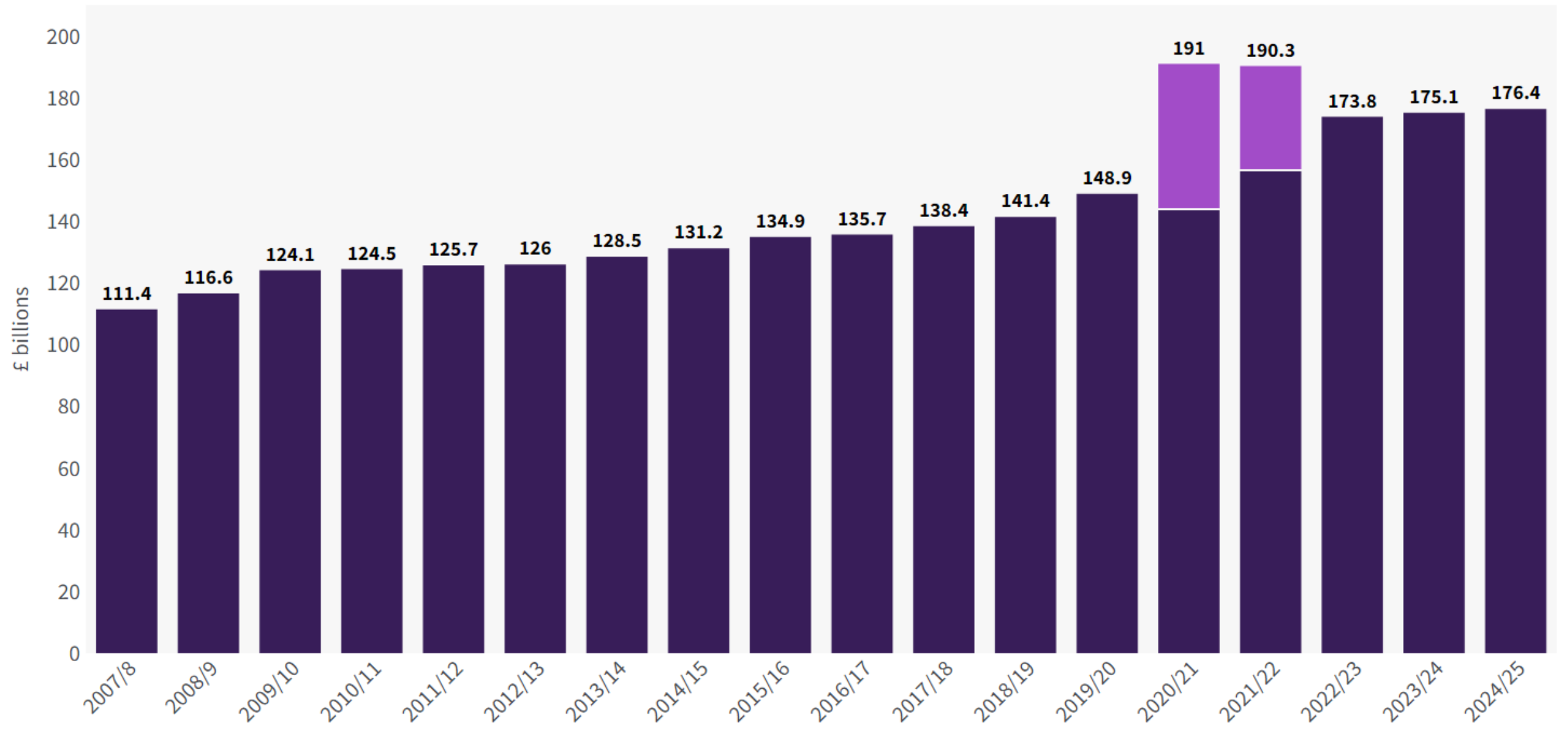
Source: ONS



Department of Health and Social Care spending

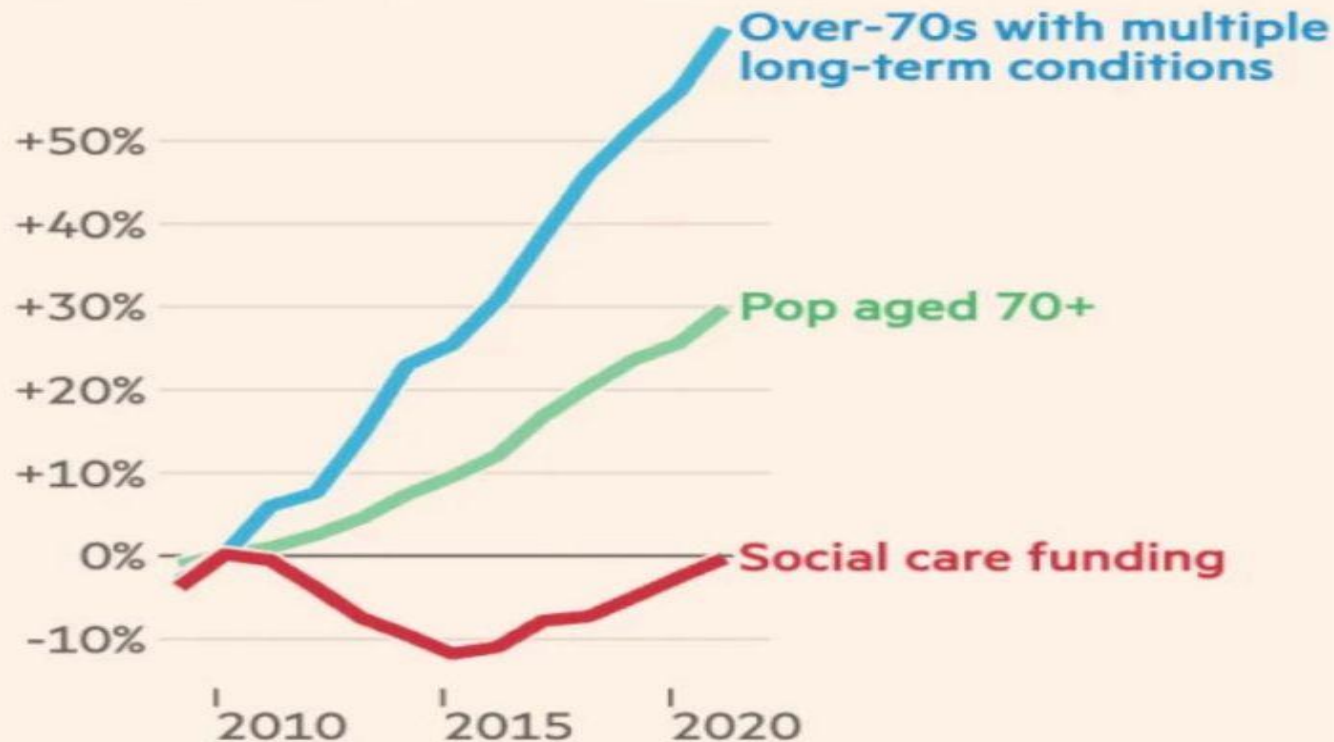
Real terms in 2021/22 prices, England

Core Covid-19



Social care funding in England is still below its level in 2010, while the population it serves has grown by more than 60 per cent

Change in each indicator relative to 2010

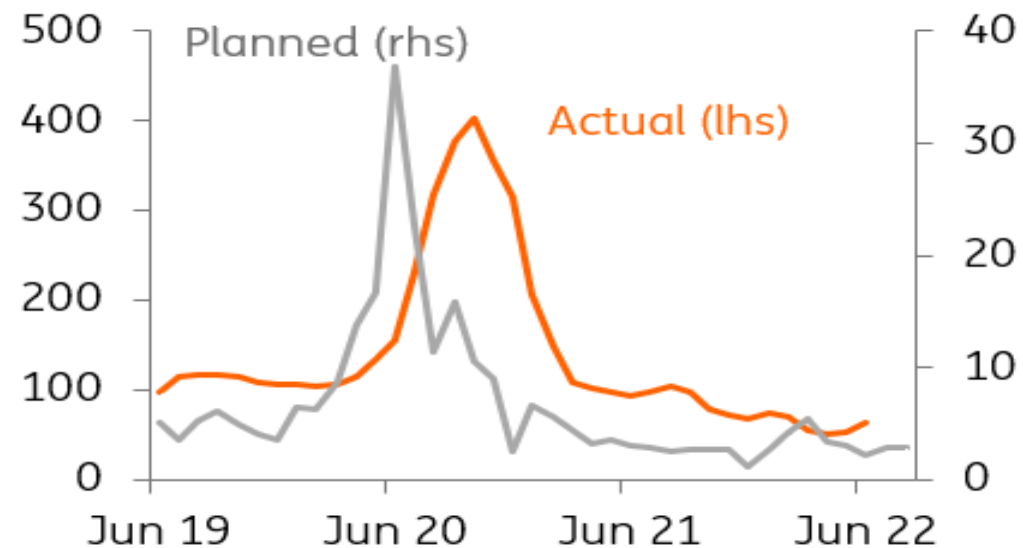


Sources: Health Foundation, NHS Digital
 FT graphic by John Burn-Murdoch / @jburnmurdoch
 © FT

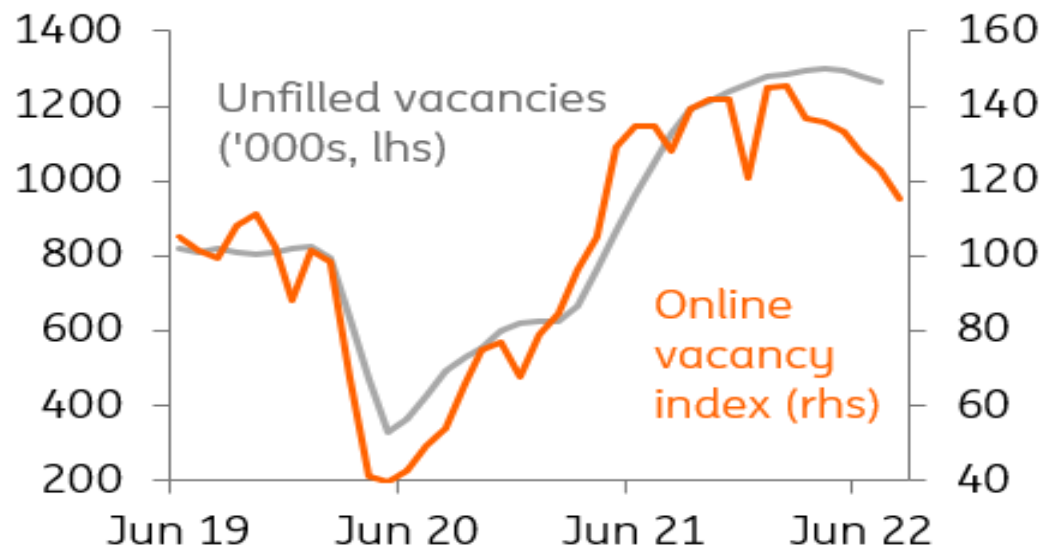


Worker demand

Redundancies ('000s)



Vacancies

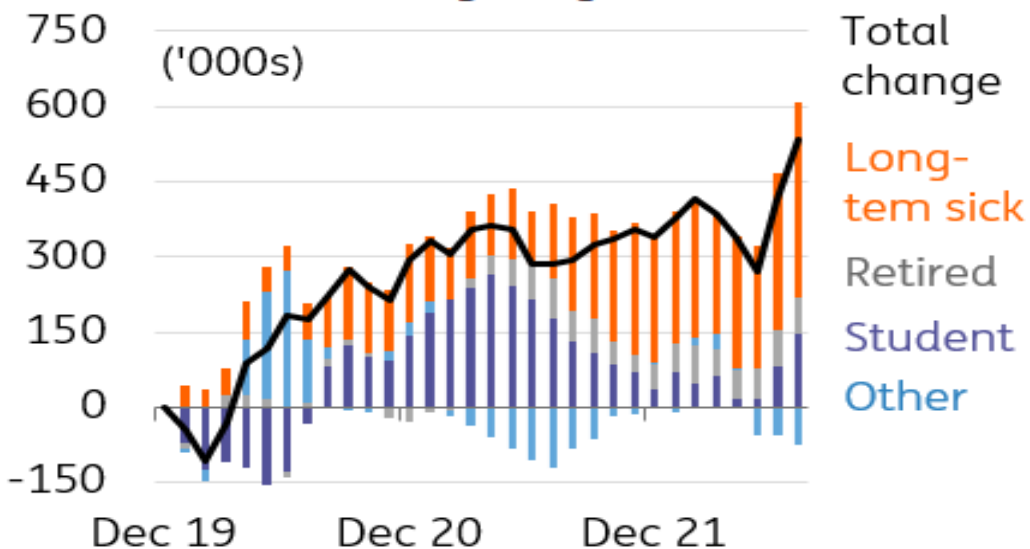


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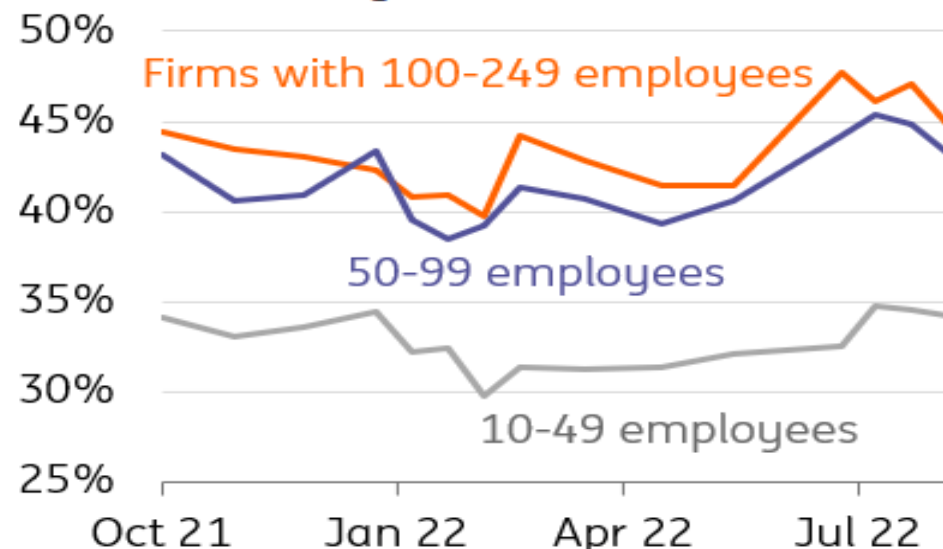
Source: ING

Worker supply

Economic inactivity (chg since Dec 19)



Worker shortages (% of firms)



Multiple causes: This is NOT about the NHS alone

Mental ill health drives worklessness among UK young men, research finds

Charities warn trend could lead to 'vicious cycle' barring many aged 18-24 from workforce



Opinion **Data Points**

Chronic illness makes UK workforce the sickest in developed world

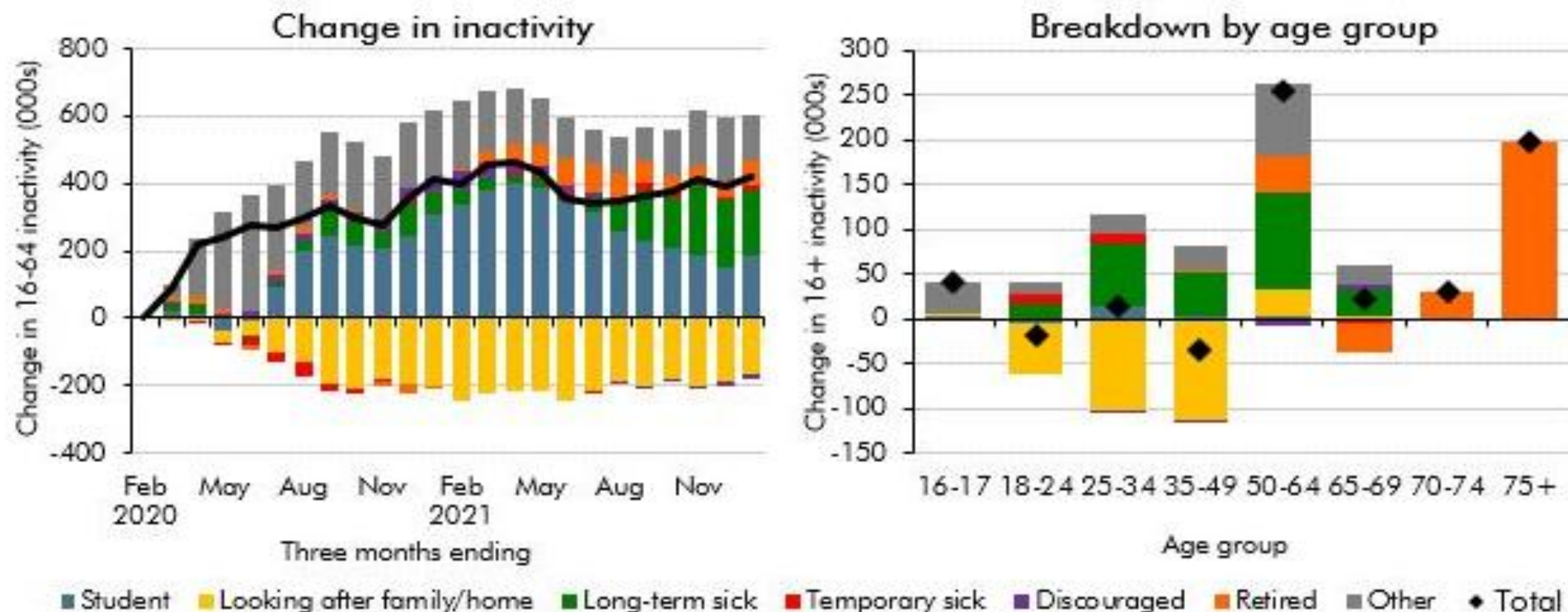
Every country saw economic inactivity spike during Covid but only in Britain is a rise in worklessness continuing

JOHN BURN-MURDOCH

+ Add to myFT



Chart E: Change in inactivity over the pandemic

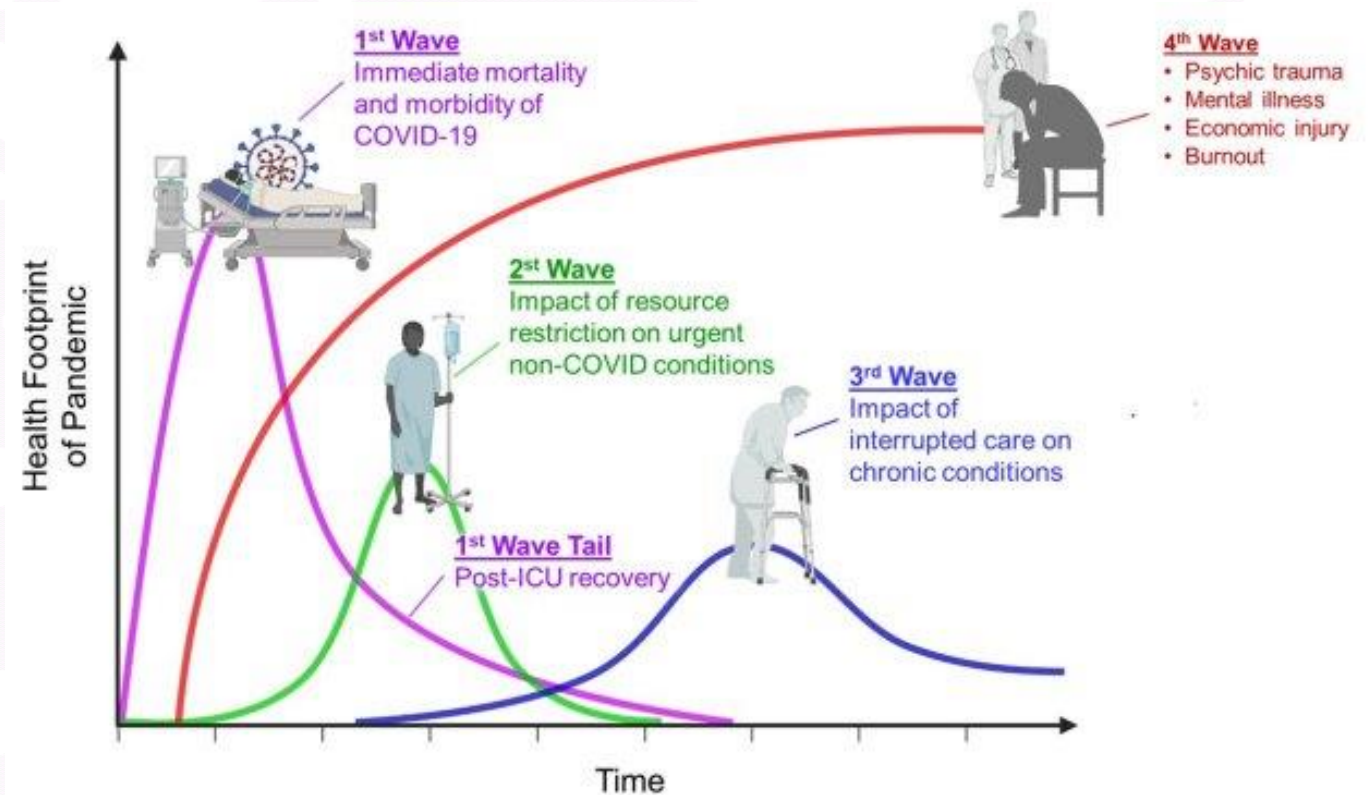


Note: The left-hand panel captures the change in inactivity from the three months ending in February 2020. In contrast, the right-hand panel shows changes between the fourth quarter of 2019 and the fourth quarter of 2021, so the total changes are not equal.

Source: ONS, OBR analysis of LFS microdata

Have we learned that Covid, HIV, many other diseases are Syndemics not pandemics?

- Singer, 2009
- 1st Wave: Immediate mortality and morbidity of COVID-19.
- 1st Wave Tail: Post-ICU and admission recovery for many patients.
- 2nd Wave: Impact of resource restrictions on non-COVID conditions – all the usual urgent things that people need immediate treatment for – acute.
- 3rd Wave: The impact of interrupted care of chronic conditions (people stayed home).
- 4th Wave: Psychic trauma, mental illness, PTSD, economic injury, burnout, and more.
- LONG COVID



Have we learned the syndemic impacts of poverty?

Impacts

- Physical
- Emotional
- Psychological
- Social

Problems

- Our conceptualisation of poverty and what health and care systems can do has been far too narrow
- I'd like to ban the word “wholistic” or “holistic” because it elides too much in our thinking and replace with a “systems thinking – what can I do, what can others do” mindset

What is “Levelling Up” Then?

- A 2019 manifesto pledge and post-Brexit policy agenda
- Broadly defined – from ‘pride of place’ to ‘addressing regional inequalities’ to ‘closing the productivity gap’
- Driven in Govt by Michael Gove, with Neil O’Brien MP and Andy Haldane (and Lisa Nandy MP in opposition)
- A mix of policy, funding and incentives – a long-term agenda which will need to cover multiple spending review periods
- The start of a new phase of policy vis-a-vis the regions – on devo, local growth, public services and place
- Politically important – both in terms of the current Parliamentary map, and in relation to the Union



The White Paper Headlines

- A mission for Govt disguised as a policy white paper...
- Twelve long-term 'missions'
- Devolution & Local Growth
- Research and Innovation
- Post-EU Funding (Shared Prosperity Fund)
- Skills & Adult Education
- Housing and Regeneration
- Long-term funding & accountability...
- Healthy Life Expectancy Mission!

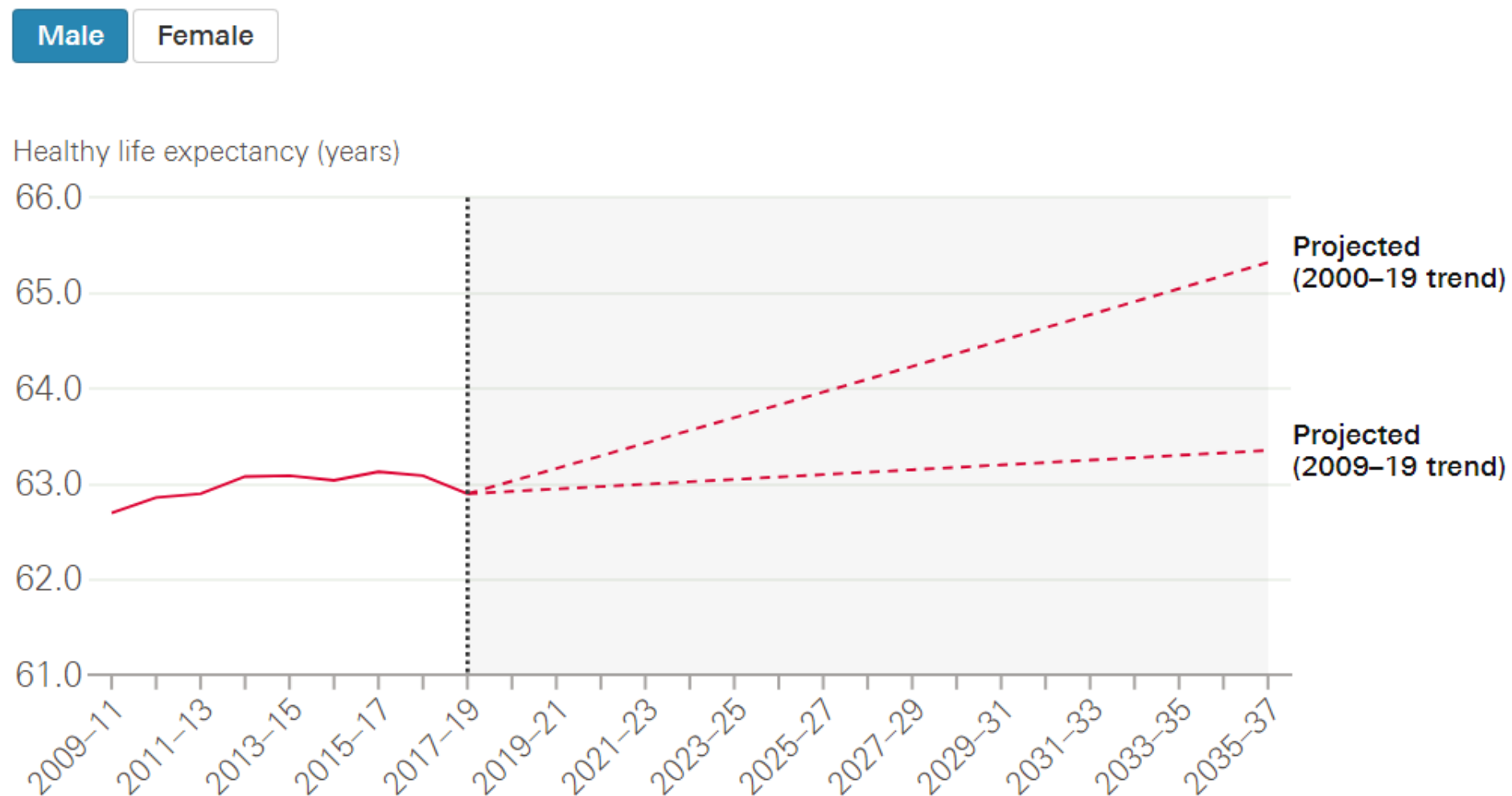


Healthy Life Expectancy

- Improve healthy life expectancy by 5 years by 2035
- Narrow the gap between areas with best and worst health
- Healthy life expectancy target: the scale of the challenge

A continuation of stalling trends in healthy life expectancy in 2009–19 could mean limited progress for men, and a decline for women

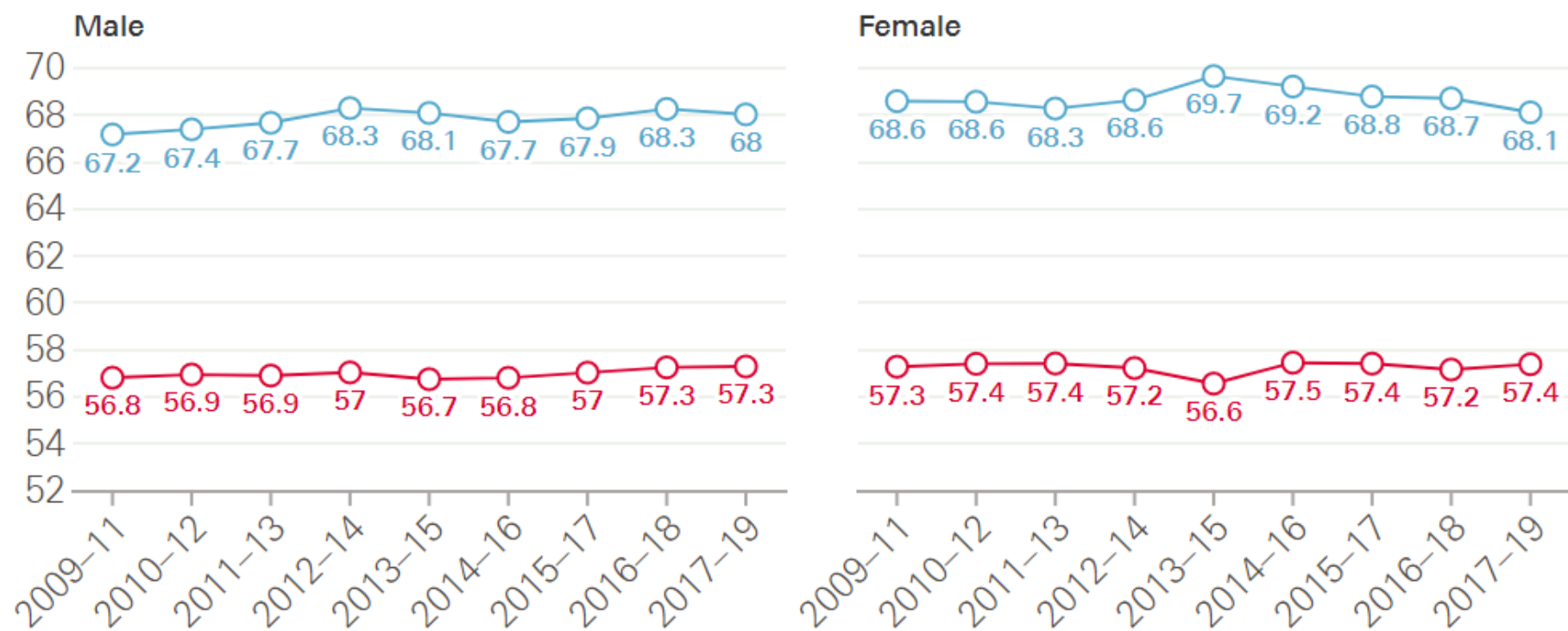
Male and female health state life expectancy trends: UK, 2009-11 to 2035-37



The gap in healthy life expectancy between the most and least healthy 10% of local authorities has remained over the past decade

Top and bottom 10% of upper tier local authorities by health state life expectancy: UK, 2009–11 to 2017–19

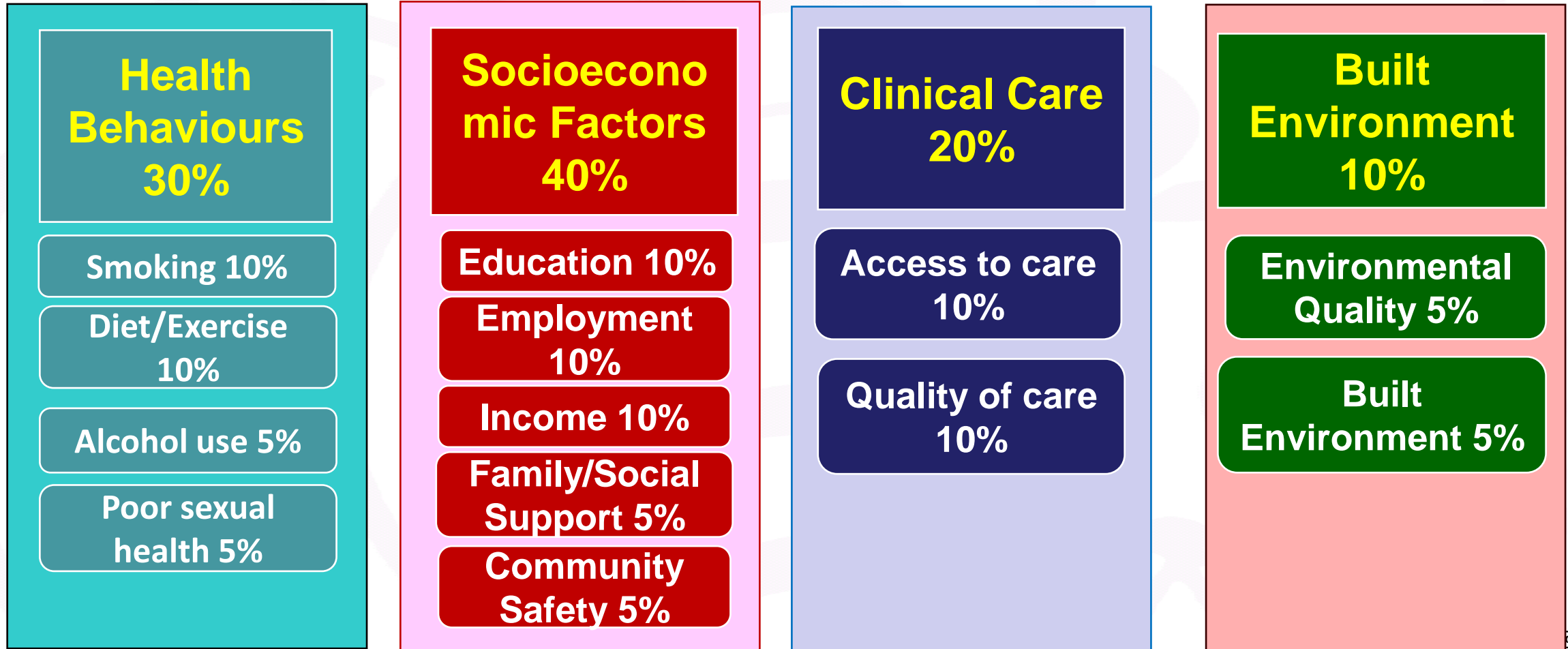
- Average healthy life expectancy in the bottom 10% of local authorities
- Average healthy life expectancy in the top 10% of local authorities



Meanwhile...

- ICS Reconfiguration
- NHS Waiting list was at 4m before covid not at 6
- 100,000 workforce shortage and exacerbating
- Local government fiscal crisis
- What can we do?

Go back to first principles: what makes us healthy or unhealthy across life?



Source: Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute. *This data is used in US to rank counties by health status. ONS creates a health index which is not dissimilar*

District and County Offers

- Important to identify not just the ICS agenda but what you do AS OF RIGHT AND EXISTENCE
- District Council Contribution to Health
 - 2015
 - 2018
 - 2019
 - 2023 DCN Report



Some key points

- Levelling up will not happen through the NHS alone
- Large Scale Health Programmes often create an inverse care law
- The example of Wegovy – “wee govie”
- The example of record levels of STIs

Layers and Levels

| Layer/Level | Wider Determinants | Primary Prevention | Secondary | Tertiart |
|------------------------------------|--------------------|--------------------|-----------|----------|
| Political/Legislative/Systemic | | | | |
| Ecological | | | | |
| Public Realm/ Built Environment | | | | |
| Social | | | | |
| Interpersonal | | | | |
| Psychological | | | | |
| Biological | | | | |

Example: key psychological skills for addressing poverty

- Stigma – using the “social cure” insights from trauma psychology in communities – need to widen and nuance our understanding of trauma
- Psychological Flexibility – getting people into employment
- The mindset to access help
- The mindset to think widely about what people need
- The mindset to think systems
- The mindset to naturally collaborate



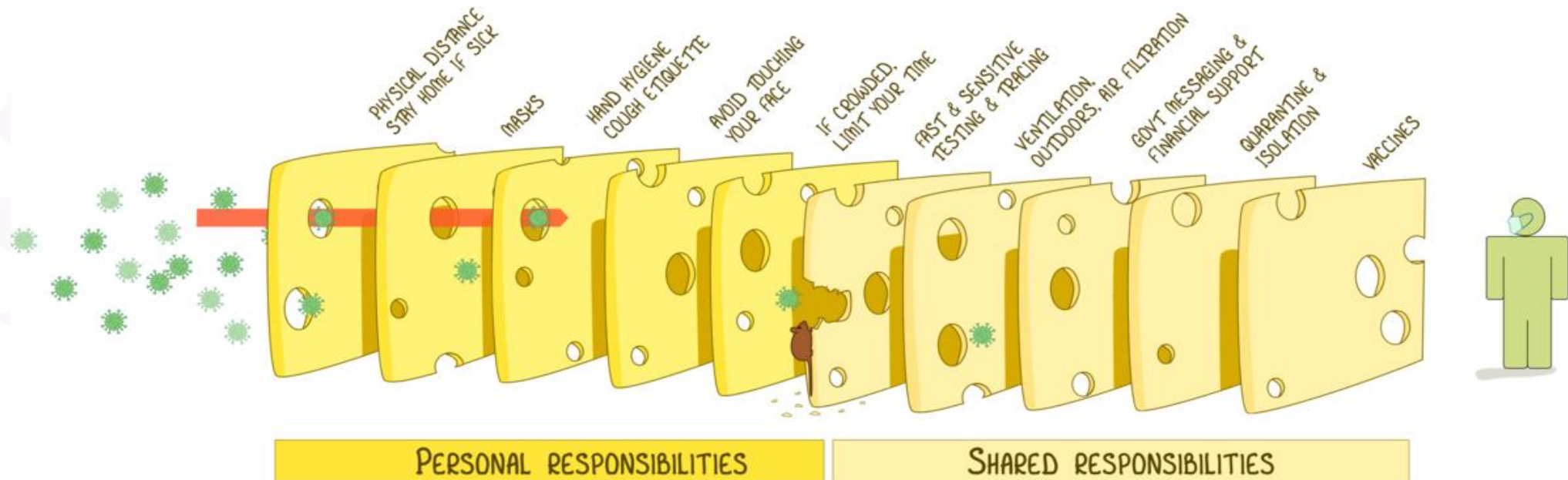
The big Leadership Tasks for tough times

1. Identify the absolute core must do's to shift the outcome and who's job it is
2. Work with others in the system to identify who can do what, at national, regional and local levels
3. Articulate the harm with evidence and articulate what can be done about it -be as constructive as you can be and as challenging as you need to be
4. Get engaged with ICSs and make sure they understand this is “not all about the NHS” it's about the system
5. Get engaged with other system key players

If there is a combination (swiss cheese) approach to Covid, is there one to levelling up?

THE SWISS CHEESE RESPIRATORY VIRUS PANDEMIC DEFENCE

RECOGNISING THAT NO SINGLE INTERVENTION IS PERFECT AT PREVENTING SPREAD



EACH INTERVENTION (LAYER) HAS IMPERFECTIONS (HOLES).
MULTIPLE LAYERS IMPROVE SUCCESS.

Thank you!

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