

#10

Healthy Futures

Sustainable development and health inequalities

“Public health is not about a siloed approach to, for example, smoking related disease and obesity, but about improving peoples mental health and well being, which is why caring for the environment is such an important part of that.”

Anne Milton MP Parliamentary Under Secretary of State for Public Health, 19 July 2010

Health inequalities are a significant issue in England; where social status influences life expectancy, quality of life and life chances. Wider determinants, including social, cultural, economic and environmental factors, have an impact on health and wellbeing. The poorer socio-economic groups in society feel the negative health effects of these disproportionately. Influential environmental factors include climate change, food, transport, green space and the built environment.

The NHS has a key role to play in tackling health inequalities through both the services it provides and the way it operates. *Equity and Excellence: Liberating the NHS* (the Government’s NHS White Paper) proposes a duty on the NHS to promote equality and tackle health inequalities in access to healthcare. Through acting as a ‘good corporate citizen’ in its local community, the NHS can adopt a sustainable development approach to have a positive impact on the wider determinants of health.

Many NHS trusts are already adopting a sustainable approach. They are moving to more community-based services, are looking to prevent problems rather than treating symptoms, and are lowering their carbon footprint. The NHS *Route Map for Sustainable Health* supports their progress.

This tenth, and final, issue of *Healthy Futures*, focuses on how the NHS and its partners can contribute to reducing health inequalities, and how, in tackling the environmental determinants of health, decision makers can help prevent ill health, reduce inequalities and reduce the resource intensity and cost of the NHS.

The importance of tackling

What are health inequalities?

Health inequalities are 'systematic differences in health status between socio-economic groups'. These differences are reflected in a social gradient in health – the lower a person's social position the worse his or her health. Despite a marked improvement in the nation's health over the last 150 years, health inequalities remain. According to a recent review, people living in the poorest areas will, on average, die seven years earlier than people living in richer areas and spend up to 17 more years living with poor health.

Why tackle health inequalities?

Tackling health inequalities is a matter of fairness and social justice. It saves the lives of people otherwise dying prematurely, and has economic benefits in reducing the financial losses and costs from illness associated with health inequalities. Tackling them is challenging, but possible – the complex way in which these factors interact is demonstrated in Figure 1.

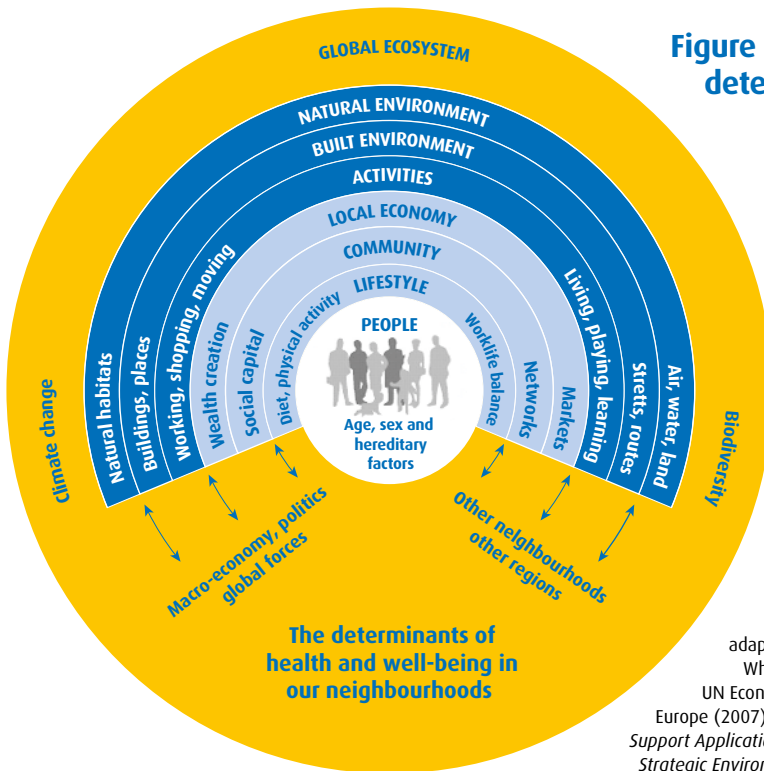


Figure 1. The main determinants of health

Source: Barton and Grant (2006) adaption of Dahlgren and Whitehead (1991) from UN Economic Commission for Europe (2007) *Resource Manual to Support Application of the Protocol on Strategic Environmental Assessment*.

Fair Society, Healthy Lives – the Marmot Review

This independent review of health inequalities, undertaken by Professor Sir Michael Marmot of University College London, advised on a future strategy for reducing health inequalities in England post-2010. The Marmot Review said that action to tackle health inequalities must be set in the broader context of people's lives. It made recommendations to reduce health inequalities across six themes within two broad policy goals:

- Create an enabling society that maximises individual and community potential
- Ensure social justice, health and sustainability are at the heart of all policies

Sustainable Development as a framework for tackling health inequalities

Sustainable development offers a framework for tackling health inequalities through:

- Taking a long-term perspective that draws attention to the needs and claims of future generations and intergenerational equity
- Focusing on the environmental determinants of health and health inequalities, such as climate change
- Investing in co-benefits that reduce environmental damage, promote social justice and narrow health inequalities
- Developing policies and actions that improve life for the poorest people in the global population

Ref: SDC (2010) Sustainable Development: The key to tackling Health Inequalities, p5

A vision for a sustainable health system

'A compassionate society living in a high quality environment with reduced health inequalities'



Tackling health inequalities is recognised as core to developing a more sustainable health system. *Route Map for Sustainable Health* sets out a number of ways for organisations to progress towards a sustainable healthcare system. It builds on progress made since the launch of the *NHS Carbon Reduction Strategy* in 2009 and will ensure the NHS of the future remains in the best possible position to improve quality and to limit its impact on the environment within which it works.
www.sdu.nhs.uk

health inequalities

HEALTHY LIVES, HEALTHY PEOPLE: HEALTH INEQUALITIES, SUSTAINABILITY AND CLIMATE CHANGE

Healthy Lives, Healthy People: Our strategy for public health in England (the Government's public health White Paper that sets out their long-term vision for the future of public health in England) emphasises the importance of prevention in improving health outcomes, addressing the wider determinants and tackling health inequalities by improving the health of the poorest fastest. It acknowledges the importance of considering sustainability and climate change in tackling health inequalities:

'The sustainability agenda and climate change can help frame the way health communities and places are created... and create conditions that enable everyone to flourish equally.'

The cognitive bias of most people means that they are likely to discount the future for the sake of the present and are more likely to respond to instant rewards. The Marmot Review argues that climate change is one of the biggest public health

threats of the 21st Century, with the potential to increase health inequalities. There are community responses that can help address long-term challenges like climate change while having a positive impact on health in the short-term, through:

- active travel – delivering low-cost health improvements and reducing emissions
- green spaces – improving mental health and the quality of community life, offering some protection from the expected increase in heat waves and flooding
- spatial planning – promoting new ways of sustainable living and working
- behaviour change – embedding new ways of sustainable living and working
- community projects to harness renewable energy – mitigating the effects of climate change

Ref: DH (2010) Healthy Lives, Healthy People: Our strategy for public health in England p39

“One critical measure of success must be a demonstrable reduction in health inequalities in local areas. .. [and]... because the determinants of health extend far and wide, we will lead a cross-government strategy to tackle the drivers on demand on the NHS and make Britain a healthier nation”

Andrew Lansley MP, Secretary of State for Health, 7 July 2010

“Reducing health inequalities is a responsibility shared between a range of different sectors and services. Local and national decisions made in schools, the workplace, at home and in government as well as across the NHS, all have the potential to help or hinder ill health prevention”

**Fair Society, Healthy Lives
– the Marmot Review**

Tackling the environmental determinants of health inequalities

The environment plays a significant role in contributing to health inequalities. Food, transport, green space and the built environment are all key factors in determining health. How these are organised and accessed in communities can enable and promote healthy behaviours and have a big impact on health inequalities. There is, however, a clear social gradient in the 'healthy' characteristics of communities. The link between deprived areas and environmental conditions is shown in Figure 2.

By giving greater acknowledgement to environmental factors in decision making, those involved in delivering our health system can help to reduce health inequalities and tackle risks such as climate change at the same time – as well as realising a wide range of other co-benefits. For those unsure where to start, the publication *Fit for the Future*, provides NHS Trusts with five recommended steps they can take to help tackle climate change and contribute to a sustainable low-carbon healthcare system.

Food

Poorer social groups are less likely to have access to a healthy diet. Cheap food is often higher in fat, salt and sugar, more readily available and affordable than healthy, sustainable food options. Combined with increased levels of inactivity, this has created an environment that promotes the adoption of unhealthy lifestyles, with health consequences that have a disproportionate effect on poor people.

A sustainable food system favours less energy-intensive processes to produce healthier food that is easily accessible by all. It minimises carbon emissions in the production, packaging, transport and preparation of food, and avoids waste. Supporting local food production and favouring seasonal produce can help to reduce environmental impacts, whilst saving the NHS money and supporting local business.

The NHS is in a good position to support a sustainable food system, spending over £500 million on food every year. It can set a good example by serving healthy, sustainable food to staff, patients and visitors. NHS Trusts can assess how sustainable their procurement practices are through using the *Good Corporate Citizenship Assessment Model*.



Climate change

Climate change has been identified as the key threat to human health in the 21st Century. In England, this is likely to mean an increased risk of extreme weather events, such as heat waves and flooding. Poorer social groups are likely to be more exposed to these risks, and to have fewer resources to insure against them or deal with their effects.

It is vital that actions to mitigate the effects of climate change do not increase health inequalities. Opportunities for healthy, low-carbon living need to be available and accessible to all – not just the well-off. This means thinking about the physical characteristics of communities and what motivates behaviour in different people, so that they can all be encouraged to lead healthy, sustainable lives.

If those in lower socio-economic groups enjoyed the same level of health as those in higher socio-economic groups, this would be likely to relieve the pressure on the NHS – helping to reduce the cost and carbon footprint of the NHS. The NHS contributes over 25 per cent of public sector carbon emissions. The *NHS Carbon Reduction Strategy for England* sets out how the NHS can reduce its carbon footprint, with the aim of achieving a 10 per cent reduction on 2007 levels by 2015.

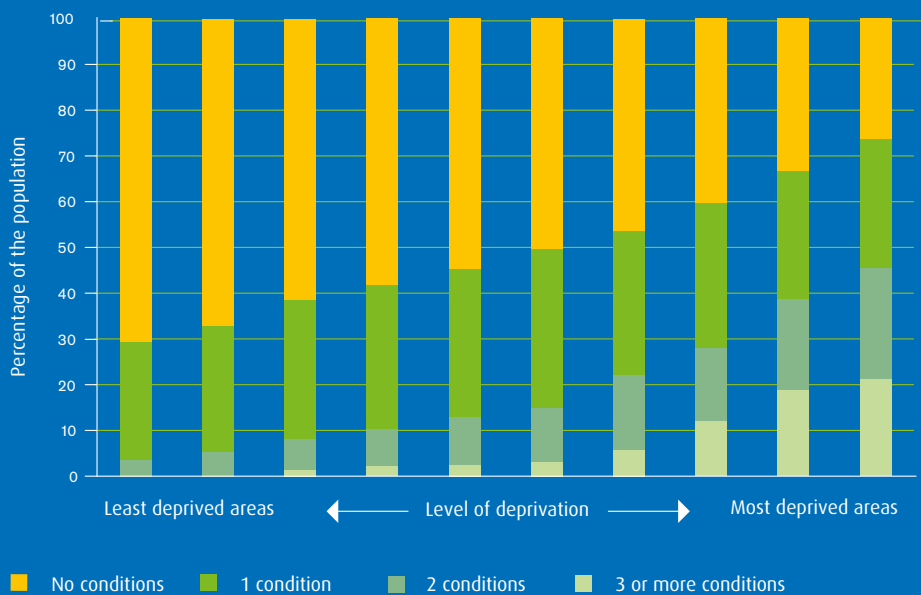
Transport

Transport contributes to some of the greatest challenges to public health in England, with the environmental and health impacts of our transport system falling disproportionately on the poor. Road traffic injuries strongly correlate with poverty and unemployment, air pollution is linked to a number of health problems, and high levels of inactivity have led to an obesity epidemic that is having serious health consequences.

There are opportunities to improve the transport system to reduce these impacts – favouring access to public transport and promoting active travel. Activities to encourage active travel should particularly focus on prioritising and supporting those from lower socioeconomic groups. Equality in access to services is also an important factor, and should be a consideration in the design and location of buildings and services. The creation of a new public health service – Public Health England – and the strengthening of the role of local government in public health will help to enable good access to health services that prevent avoidable illness, including a new approach to reach out to disadvantaged, vulnerable and socially excluded groups.

The travel policies of NHS organisations can influence the lives of millions of people in the communities they serve. The 2009 *Annual Report of the Chief Medical Officer* advises on steps NHS organisations can take. They can develop travel plans that offer incentives and facilities to encourage cycling and walking, plan buildings and services so that they are accessible by public transport or active travel, and reduce the need to travel by offering care closer to home, and by making use of technologies such as videoconferencing.

Figure 2: Populations living in areas with, in relative terms, the least favourable environmental conditions, 2001–6



“Sustainability is essential for the long term prosperity of any organisation. What is good for the environment and sustainability is also good for our health.”

Simon Burns MP, 1 February 2011

Environmental conditions: river water quality, air quality, green space, habitat favourable to bio-diversity, flood risk, litter, detritus, housing conditions, road accidents, regulated sites (e.g. landfill). Source: Department for Environment, Food and Rural Affairs: Ref: Marmot M (2010) *Fair Society, Healthy Lives*, p31

Green Space

Spending time near or in green space can produce a wide range of positive health impacts, including lower blood pressure, improved mental health and decreased recovery time from surgery. Access to safe green space also encourages physical activity, social contact and integration. As poorer social groups in urban areas tend to have lower access to safe green space, they are less able to benefit from these positive impacts.

Green space can also help mitigate a number of environmental factors that affect health, such as the urban heat island effect, UV and pollution. Reduced access to green space, combined with social isolation and inequality can produce chronic stress, which is linked to a number of serious health problems, including anxiety and depression, and illnesses such as diabetes, cancer, cardiovascular disease and lung disease.

NHS Trusts have the opportunity to work with local government in joining up health, social care and public health services. They can use their influence to: encourage planning decisions that promote access to green space; work to improve green space on their estate, and open it up for use by staff, patients, visitors and local communities; integrate plants and green views into the design of their buildings, helping to decrease patient recovery times; and, promote the benefits of green space in treating and preventing illness.

Both the Government's *Localism Bill 2010-11* and *Equity and Excellence: Liberating the NHS* support these actions. Both aim to give greater power to local communities, enabling them to improve health throughout people's lives, reduce inequalities and focus on the needs of the population.

Case study



NATURE'S CURE

Green Gyms allow participants to improve their health in the open air, whilst protecting and improving the environment – through organised practical projects and activities, such as planting trees, building dry stone walls, clearing waterways and growing food. They are organised and run by the UK-based charity BTCV (www2.btcv.org.uk/display/greengym).

Blue Gyms (www.bluegym.org.uk) provide opportunities for participants to keep fit and improve their sense of wellbeing

by using, enjoying and protecting our water environment. Evidence shows that this kind of activity produces a range of benefits, including improving mental health, self-esteem and confidence, reducing the risk of heart attack and stroke, reducing stress, combating depression, improving and maintaining muscle strength and helping to maintain healthy weight. These schemes also play an important role in strengthening communities and raising awareness of the value of the natural environment.

“The potential benefits of physical activity to health are huge. If a medication existed which had a similar effect, it would be regarded as a ‘wonder drug’ or ‘miracle cure’.”

2009 Annual Report of the Chief Medical Officer

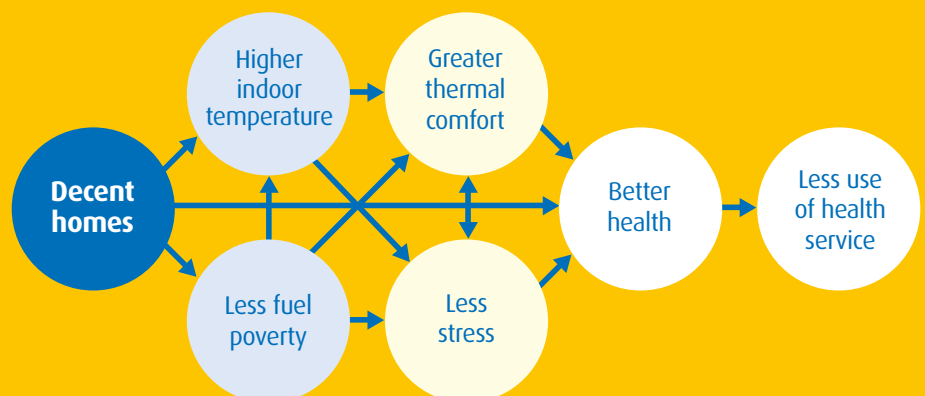
Decent homes

A report found that Sheffield's Decent Homes Programme had a major impact on the health and quality of residents – reducing heart and respiratory disease, reducing the number of accidents in the home and giving greater security and mental wellbeing.

Ref: Sheffield Hallam University (2006), Decent Homes, Better Health: Sheffield Decent Homes Health Impact Assessment, p10

http://www2.warwick.ac.uk/fac/soc/law/research/centres/whocc/sdh_hia_report.pdf

Figure 3. Possible pathways to health





A preventative approach to achieving co-benefits

Currently, the majority of the NHS budget is spent, either directly or indirectly, on the treatment and care of illness. Approximately four per cent of the total NHS budget is spent on prevention and public health.

Taking a preventative approach to healthcare can reduce health inequalities through tackling the root causes of illnesses and addressing the wider social and environmental determinants of health. The NHS has a key role to play through working with a range of sectors, services and local partners, including education, employment, planning, housing, transport and environment, to develop a shared sense of responsibility for health and wellbeing, and reducing health inequalities.

A PARTNERSHIP APPROACH

Funded by NHS Bristol and monitored by the city's local strategic partnership, a post was created in 2008 placing a public health specialist with extensive transport planning experience into Bristol City Council's City Development directorate that hosts transport planning. This was a UK first.

The part-time post aims to help planners and transport engineers understand how they influence public health challenges such as obesity, mental health and cardiovascular disease, and how they can

create environments that encourage people to walk or cycle instead of driving cars.

The post also contributes through public health evidence to Council staff (for more details see www.bristol.gov.uk/tpevidencebase) and informing consultations and bids, and in helping to facilitate programmes for environmentally sustainable transport policies and programmes across the city.

www.idea.gov.uk/idk/core/page.do?pageId=10660318

RESOURCES

2009 Annual Report of the Chief Medical Officer www.dh.gov.uk/en/Publicationsandstatistics/Publications/AnnualReports/DH_113912

Equity and Excellence: Liberating the NHS www.dh.gov.uk/en/Healthcare/LiberatingtheNHS/index.htm

Every Child's Future Matters www.sd-commission.org.uk/publications.php?id=578

Fair Society, Healthy Lives www.marmotreview.org

Fit for the Future www.sdu.nhs.uk/publications-resources/4/Fit-for-the-Future/

Good Corporate Citizenship Assessment Model www.corporatecitizen.nhs.uk

Health, Place and Nature www.sd-commission.org.uk/publications.php?id=712

Healthy Lives, Healthy People www.dh.gov.uk/healthypeople

Improving Young People's Lives www.sd-commission.org.uk/publications.php?id=1113

NHS Carbon Reduction Strategy www.sdu.nhs.uk/publications-resources/3/NHS-Carbon-Reduction-Strategy/

Route Map to Sustainable Health www.sdu.nhs.uk

Sustainable Development: The key to tackling health inequalities www.sd-commission.org.uk/publications.php?id=1053



Good Corporate Citizenship Assessment Model

NHS Trusts and organisations can gain many benefits from acting as 'good corporate citizens' and adopting a sustainable approach to the way they organise and deliver their services. Through registering with the Good Corporate Citizenship Assessment Model, they can take steps around six key areas, and in doing so, achieve many health benefits for patients and populations – helping to tackle health inequalities and to move from treatment to prevention. www.corporatecitizen.nhs.uk

The Built Environment

Where people live can have a significant impact on their health. Both through the characteristics of a local area, such as accessibility of services, education, jobs, green space and public transport, levels of crime and anti-social behaviour, and through the characteristics of individual homes.

Characteristics like cold and damp can have a direct impact on health, with those in poorer social groups more likely to experience fuel poverty and, hence, have the cold-related illnesses it can cause. Homes can be made more energy efficient through measures such as installing double-glazing and insulation. Health impacts can also be considered in the design of areas, where facilities are located, their accessibility, and whether the appearance can help reduce crime and increase feelings of safety. Both can help tackle inequity and climate change.

NHS Trusts can save money through working with local strategic partnerships to address matters such as fuel poverty and influence the design of areas and the location of facilities. They can also consider the impact of their own buildings through using the *Good Corporate Citizenship Assessment Model*.

The Sustainable Development Commission's *Healthy Futures* programme, funded by the Department of Health, helps the NHS to maximise its contribution to the health of individuals, communities and the environment. For more information visit: www.sd-commission.org.uk/health

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The small print.

This newsletter is made entirely of that paper you put out every week for the council to recycle. It was printed with inks made from vegetable oil and without using any water or alcohol (the main materials used by most printers), so it will all wash off nicely when you recycle it. The report's production was powered by renewable energy and the whole process, including transportation, is carbon neutral.