

# **So it's all about Local Government?**

..or why no one listened to  
Douglas Black, Jerry Morris, Peter  
Townsend, Derek Wanless,  
Michael Marm.....

# The old divide:

The “official” view:

- Prevention Everybody’s Business
- The Health of the Nation
- Ten Top Tips
- Health Trainers

# The old divide

The Trouble Makers view:

- The Black Report
- Marmot's Whitehall Study
- The Spirit Level
- Ten Top Tips - adjusted!3

# The CMO's advice

## Ten tips for better health (Donaldson, 1999)

- (1) **Don't smoke.** If you can, stop. If you can't, cut down.
- (2) Follow a **balanced diet** with plenty of fruit and vegetables.
- (3) Keep **physically active.**
- (4) **Manage stress** by, for example, talking things through and making time to relax.
- (5) If you **drink alcohol**, do so in **moderation.**
- (6) **Cover up in the sun**, and protect children from sunburn.
- (7) Practise **safer sex.**
- (8) Take up **cancer screening** opportunities.
- (9) Be safe on the roads: follow the **Highway Code.**
- (10) Learn the **First Aid ABC**—airways, breathing, circulation.

# Professor Gordon's view:

- (1) **Don't be poor.** If you can, stop. If you can't, try not to be poor for long.
- (2) **Don't have poor parents.**
- (3) Own a **car.**
- (4) **Don't work in a stressful, low-paid manual job.**
- (5) Don't live in **damp, low-quality housing.**
- (6) Be able to afford to go on a **foreign holiday and sunbathe.**
- (7) Practise not losing your job and **don't become unemployed.**
- (8) **Take up all benefits you are entitled to,** if you are unemployed, retired or sick or disabled.
- (9) **Don't live next to a busy major road** or near a **polluting factory.**
- (10) **Learn how to fill in the complex housing benefit/asylum application forms** before you become homeless and destitute.

# As Patrick Jenkin observed:

“...it will be seen that the Group (ie Black et al) has reached the view that the causes of health inequalities are so deep rooted that only a major and wide ranging programme of public expenditure is capable of altering the pattern. I must make clear that additional expenditure on the scale which could result from the recommendations - upwards of £2bn a year is quite unrealistic in present or any foreseeable economic circumstances.”

# So what has happened since?

- Wanless - Fully Engaged Scenario
- Simon Stevens - We didn't do it, why the NHS is so "on the hook"
- Shift to Acute, and now a limited "Ring Fence"
- 20% still smoke
- 30% drink to excess (3000 admissions a day)
- 33%-50% don't exercise
- 67% overweight/obese
- Diabetes now costs 10% of NHS Spend

## EXHIBIT ES-1. OVERALL RANKING

### COUNTRY RANKINGS

Top 2*
Middle
Bottom 2*



	AUS	CAN	FRA	GER	NETH	NZ	NOR	SWE	SWIZ	UK	US
<b>OVERALL RANKING (2013)</b>	4	10	9	5	5	7	7	3	2	1	11
<b>Quality Care</b>	2	9	8	7	5	4	11	10	3	1	5
Effective Care	4	7	9	6	5	2	11	10	8	1	3
Safe Care	3	10	2	6	7	9	11	5	4	1	7
Coordinated Care	4	8	9	10	5	2	7	11	3	1	6
Patient-Centered Care	5	8	10	7	3	6	11	9	2	1	4
<b>Access</b>	8	9	11	2	4	7	6	4	2	1	9
Cost-Related Problem	9	5	10	4	8	6	3	1	7	1	11
Timeliness of Care	6	11	10	4	2	7	8	9	1	3	5
<b>Efficiency</b>	4	10	8	9	7	3	4	2	6	1	11
<b>Equity</b>	5	9	7	4	8	10	6	1	2	2	11
<b>Healthy Lives</b>	4	8	1	7	5	9	6	2	3	10	11
<b>Health Expenditures/Capita, 2011**</b>	<b>\$3,800</b>	<b>\$4,522</b>	<b>\$4,118</b>	<b>\$4,495</b>	<b>\$5,099</b>	<b>\$3,182</b>	<b>\$5,669</b>	<b>\$3,925</b>	<b>\$5,643</b>	<b>\$3,405</b>	<b>\$8,508</b>

Notes: \* Includes ties. \*\* Expenditures shown in \$US PPP (purchasing power parity); Australian \$ data are from 2010.

Source: Calculated by The Commonwealth Fund based on 2011 International Health Policy Survey of Sicker Adults; 2012 International Health Policy Survey of Primary Care Physicians; 2013 International Health Policy Survey; Commonwealth Fund *National Scorecard 2011*; World Health Organization; and Organization for Economic Cooperation and Development, *OECD Health Data, 2013* (Paris: OECD, Nov. 2013).



# The wrong people and the wrong model

- Even MM writes “My approach is as a doctor. I am concerned with health and avoidable health inequalities”
- We are trying to change behaviours - but that’s too late for many (smoking:9%-30%)
- Politicians’ focus - terrified of “the nanny”
- ...and “life-style change is still in the “cure” rather than the “prevent” arena

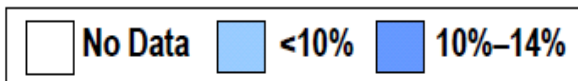
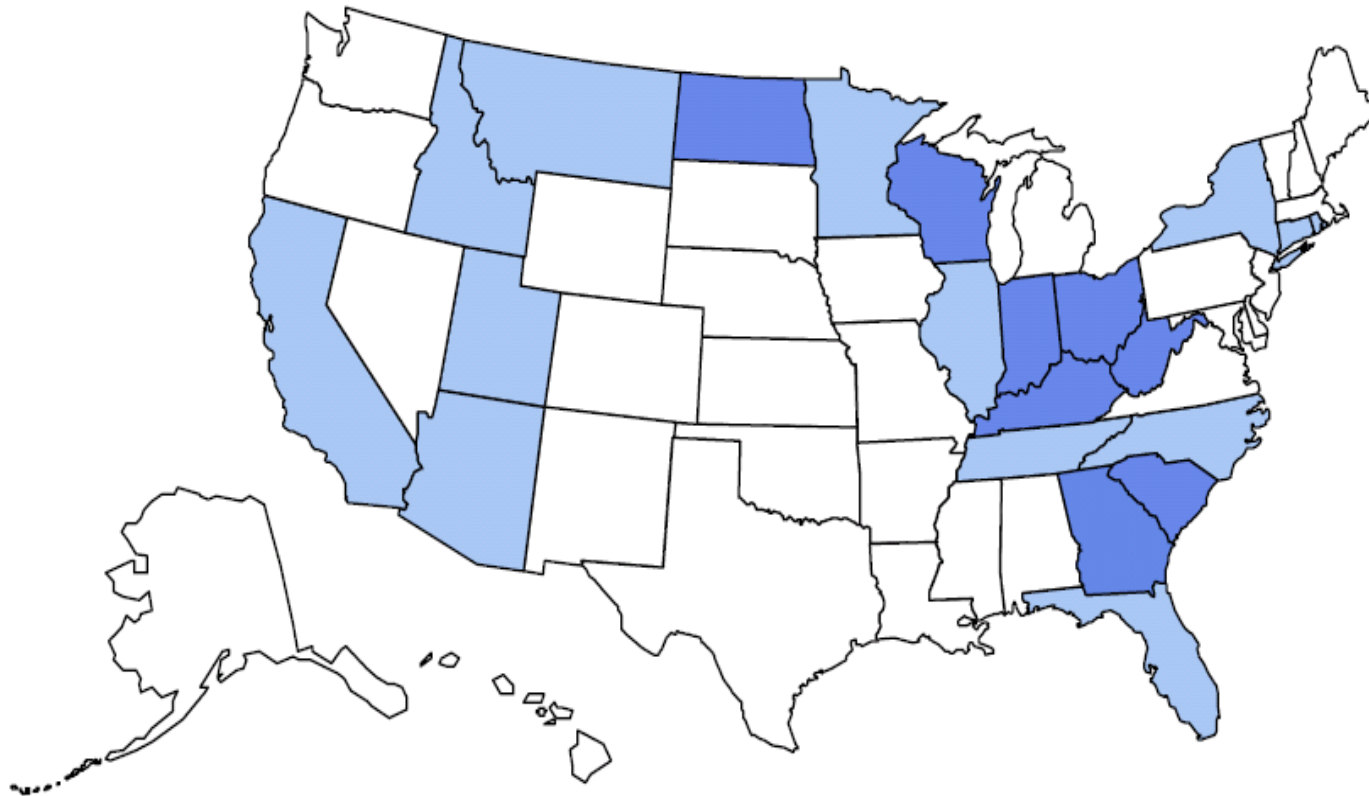
# Look:

- This didn't happen because Americans suddenly converted to greed and idleness: Obesity trends 1985-2010

# Obesity Trends\* Among U.S. Adults

## BRFSS, 1985

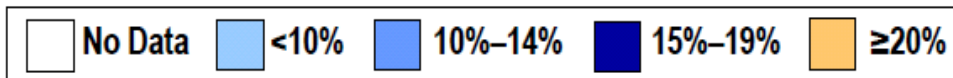
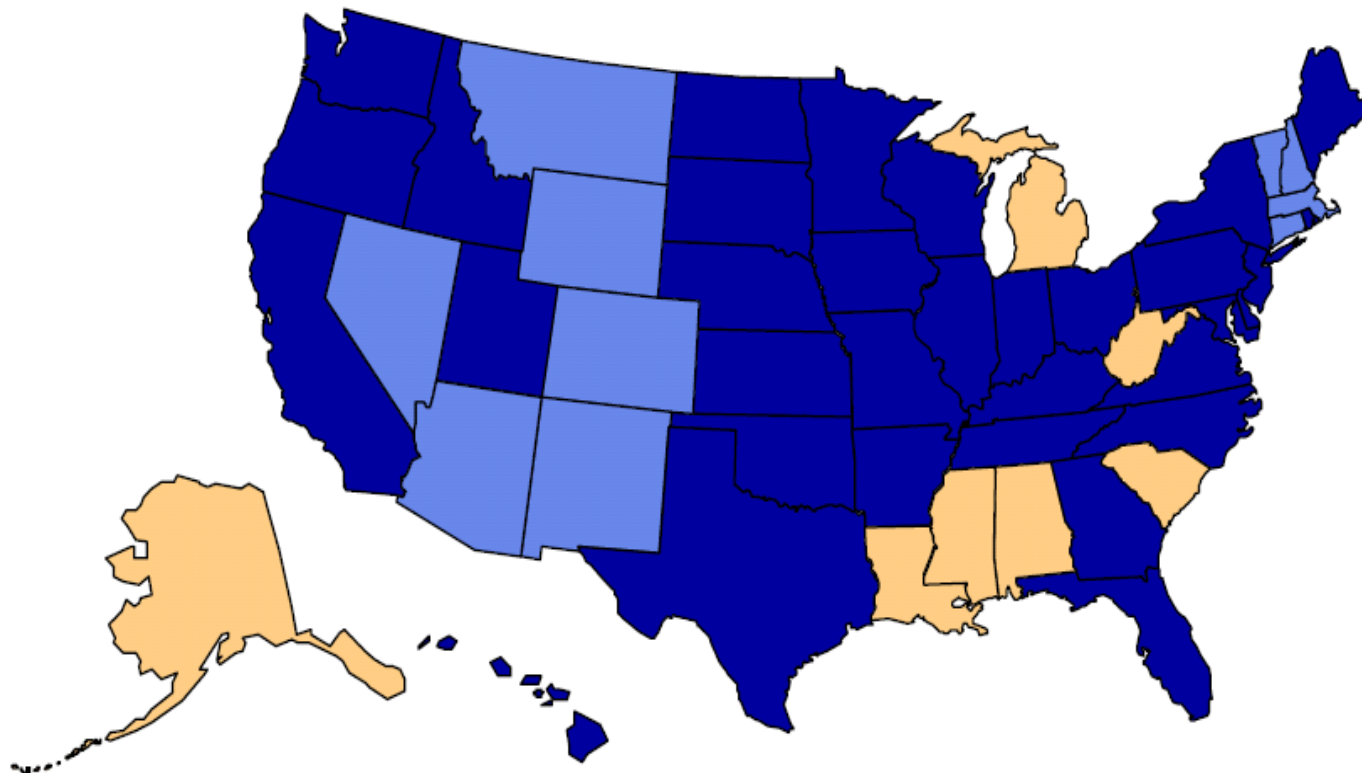
(\*BMI  $\geq 30$ , or  $\sim 30$  lbs. overweight for 5' 4" person)



# Obesity Trends\* Among U.S. Adults

## BRFSS, 1998

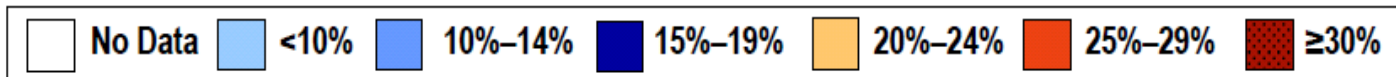
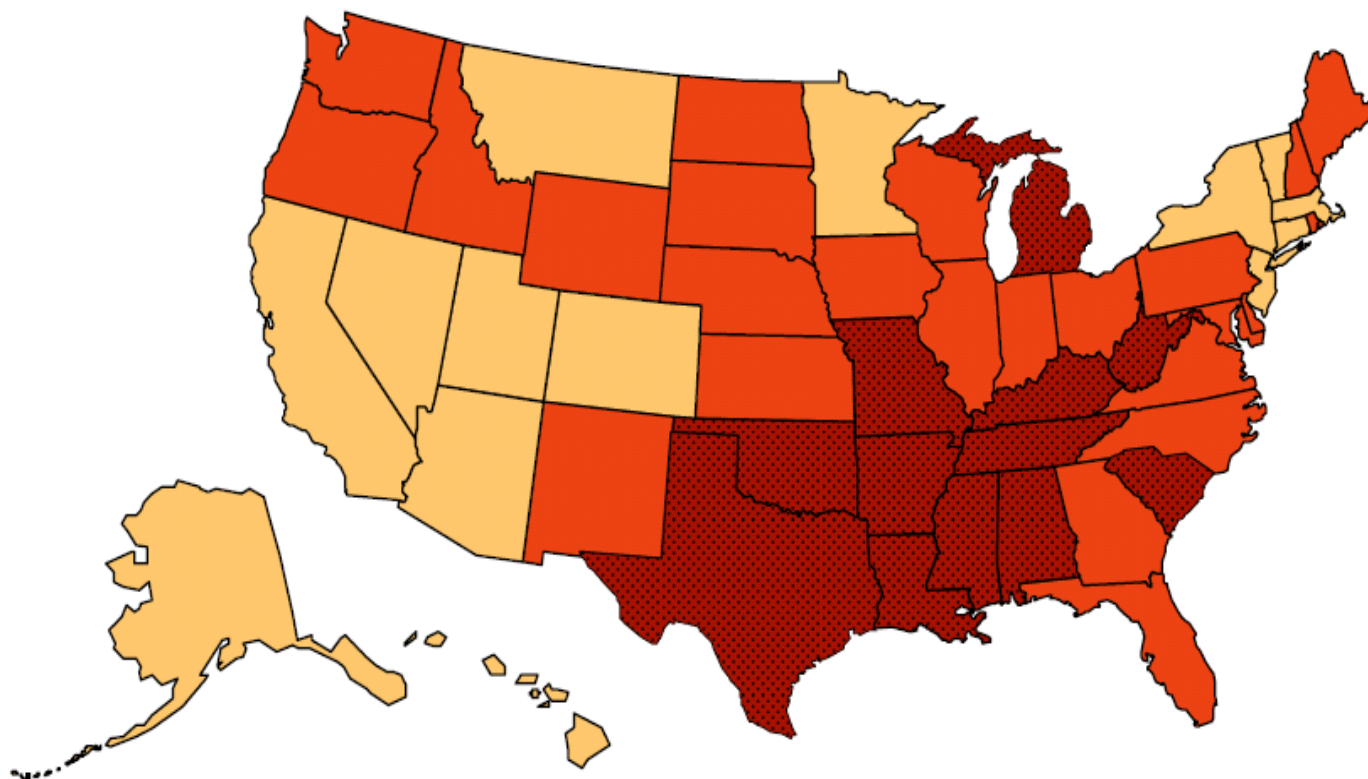
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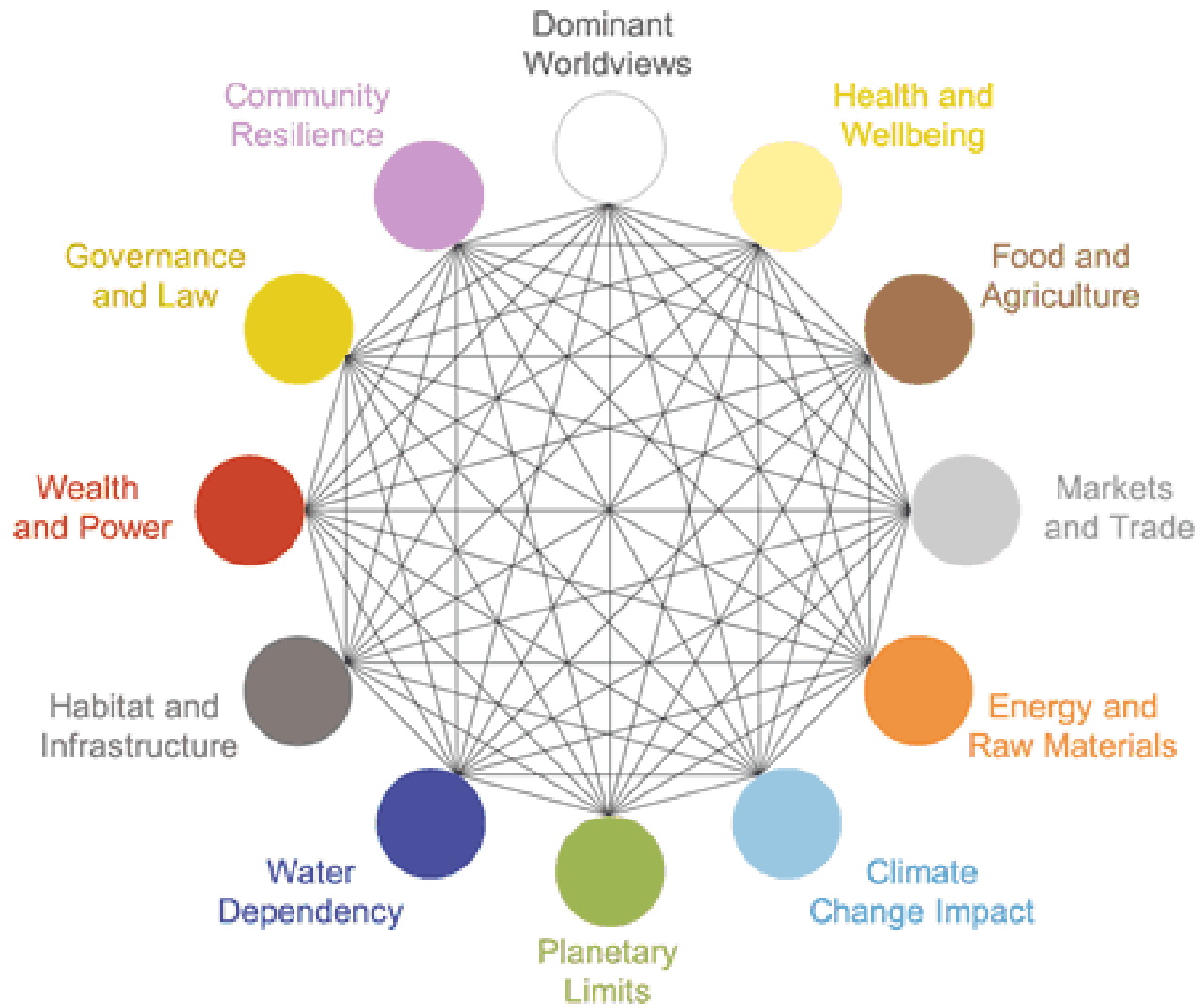


Source: Behavioral Risk Factor Surveillance System, CDC.



# Understanding Scotland

- I am indebted to Professor Mark Dooris for this link:



# Dominant Worldviews

## TRENDS

### **Dominant belief system**

- Historically, socially grounded Christianity
- Surviving social ethic of social justice, equality, human dignity and suspicion of wealth and power
- Spirituality of lament rather than celebration
- Current interest in Celtic spirituality, leading to deep green philosophy

### **Tolerance and fundamentalism**

- Return to fundamentals chimes in with appeals to the heroes of the past and iconic moments from history
- Christian fundamentalism often expressed in glitzy, commercial ways, at odds with Scottish tastes - slow to take root
- Equality as a value should recognise diversity, and so promote tolerance, when not confused with conformity. Recent reports indicate Scotland more hospitable to ethnic groups than rest of UK
- Sectarianism reducing but present, racism under the surface
- Scotland often tribal in attitudes

### **Values and outlook**

- Equality (“We’re a’ Jock Tamson’s bairns”), opportunity (the lad o’pairs) and suspicion of success (tall poppy syndrome)
- Wisdom, justice, compassion, integrity (Scottish Parliament mace)
- Educational privileges of common sense, intellectual curiosity, technological innovation
- Personal values of hard work and thrift reaffirmed in fallout of bankers episode
- Outlook clouded by inability to resolve deep seated problems of poverty despite values



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## **Ideologies and Utopias**

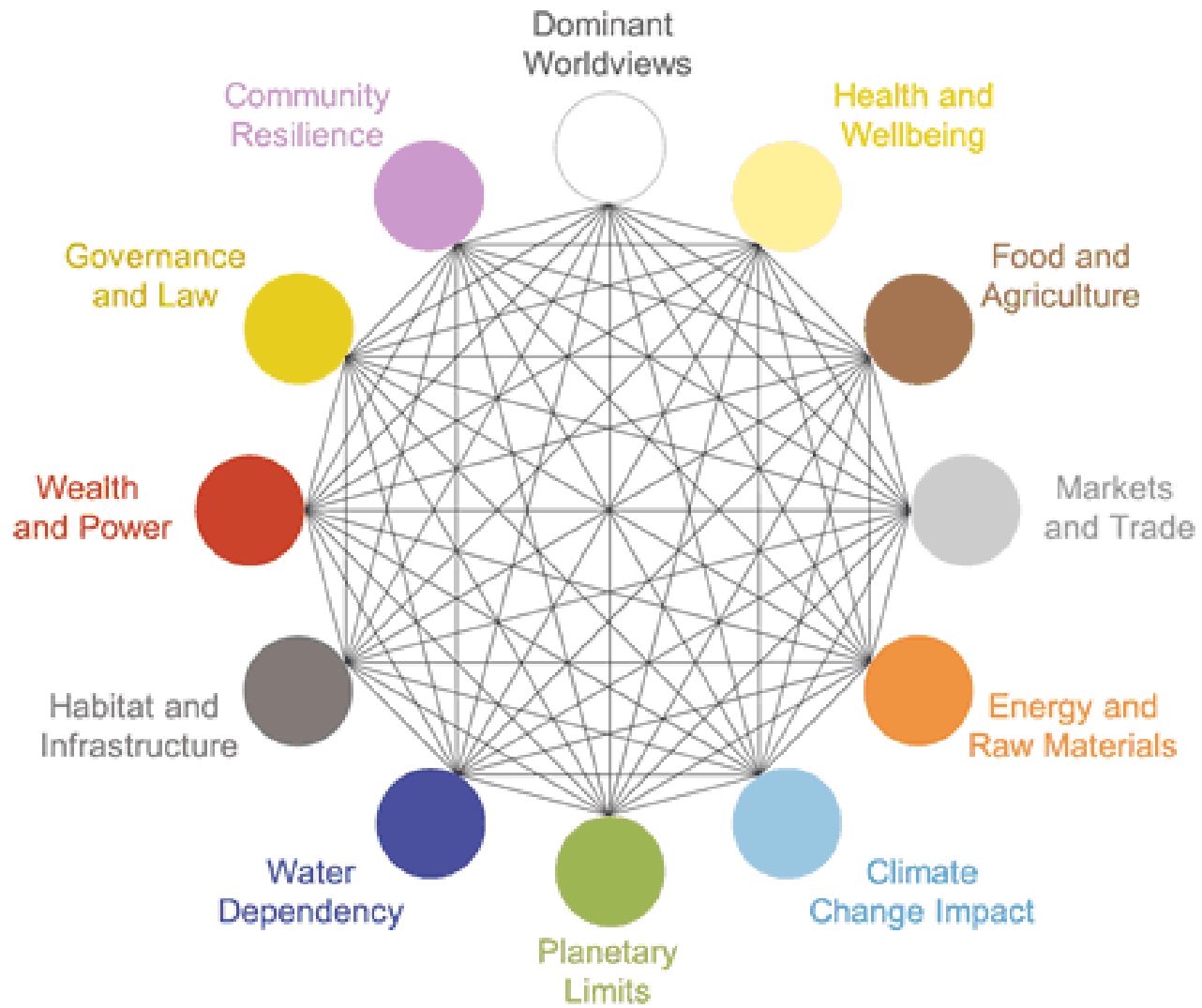
- Football success!
- Romantic notion of traditional community
- Scotland recognised for its strengths and its individuality
- Dreams of escape, through prosperity or emigration

## **Fixed or dynamic attitudes**

- Public debate inhibited by sacred cows
- Good appetite for argument that can be creative
- Good pragmatic problem solving at local level, leading to attitudinal change

## **The place of consciousness**

- Tradition of migration leads to good knowledge and understanding of other countries
- Scots prominent abroad, though this often not recognised at home
- Small country leads to informal accountability in decision making
- Reasonable understanding of complexity of local concerns



# Health in All Policies

- Health Impact Assessment
- Everything done by local government is about health and wellbeing-if it's not why are we doing it?
- That means a paradigm shift in workforce recruitment, training, union focus and regulation.

# The future public health :

- “Most of what a country spends affects health: transport, education, social protection, environment, foreign affairs, overseas development” (Marmot 2015)
- Well at least housing, spatial planning, environmental health, education and early years, public protection, economic development and development control.

# Health in All Policies

- Education: 17% - 73% 5 good GCSE's
- Housing: - 2/3 lone parents rent
  - Private renters 40% < 60%
- Income: 1/3 children < 60%
- Planning: Fast food outlets
- Transport: Public fares
- Parking: near schools/off road
- Leisure and Playing fields: 1/3 lost since 1990

# There's more...

- Licensing: Cigarettes and Alcohol
- Spatial Planning and Zoning
- Trading Standards: Healthy Heart Awards
- School Meals and Tuck Shops
- Police: Diversional point of arrest
- Fire Service...

# But – Public Health Advice is compromised...

- Eggs and Cholesterol
- Avoid fat
- Use Margarine not Butter
- Avoid Sun exposure but get Vitamin D
- Red Wine protects the heart
- E-cigarettes make you blind

# So,

- We need better evidence
- We need a Sociological Imagination
- We need Public Health associates/associations.
- The goal is longer and better lives
- And the moment is here!



# Now that really could make a difference

- And so can the West Midlands Fire Service: Improving Lives to Save Lives.
- There are major challenges outlined by Wilkinson and Pickett, Thomas Piketty, JK Galbraith and Danny Dorling.....
- Norway and the Northern Europeans are pointing to that difference but we can scale up and UKPHR must take its place .....

Thank you for listening.

Any questions or comments?