



Tackling Root causes Upstream of Unhealthy Urban Development

www.truud.ac.uk

Key challenges for engaging urban development policymakers for prevention of non-communicable diseases

Geoff Bates*: University of Bath, Institute for Policy Research

Andrew Barnfield: University of Bristol, School for Policy Studies

Sarah Ayres: University of Bristol, School for Policy Studies

EUSPR Conference ,Sarajevo, October 6th 2023, gb818@bath.ac.uk



Festival of the Future City

How Do We Build Healthier Cities?



University Consortium

City/Combined Authority Partners



Research Funders



Professional Membership Partners



Creative Partners



- Many factors in urban areas can protect or worsen our health.
- Many urban areas are currently not 'healthy'.
- Conditions are often worst in the most deprived areas.
- Improving the quality of urban areas is therefore one way to prevent disease and reduce health inequalities.
- WHO and UN-Habitat Urban Health initiatives: health must be central to government urban policies



Source: Public Health Wales

Looking upstream to prevent disease

Tackling Root causes Upstream of Unhealthy Urban Development



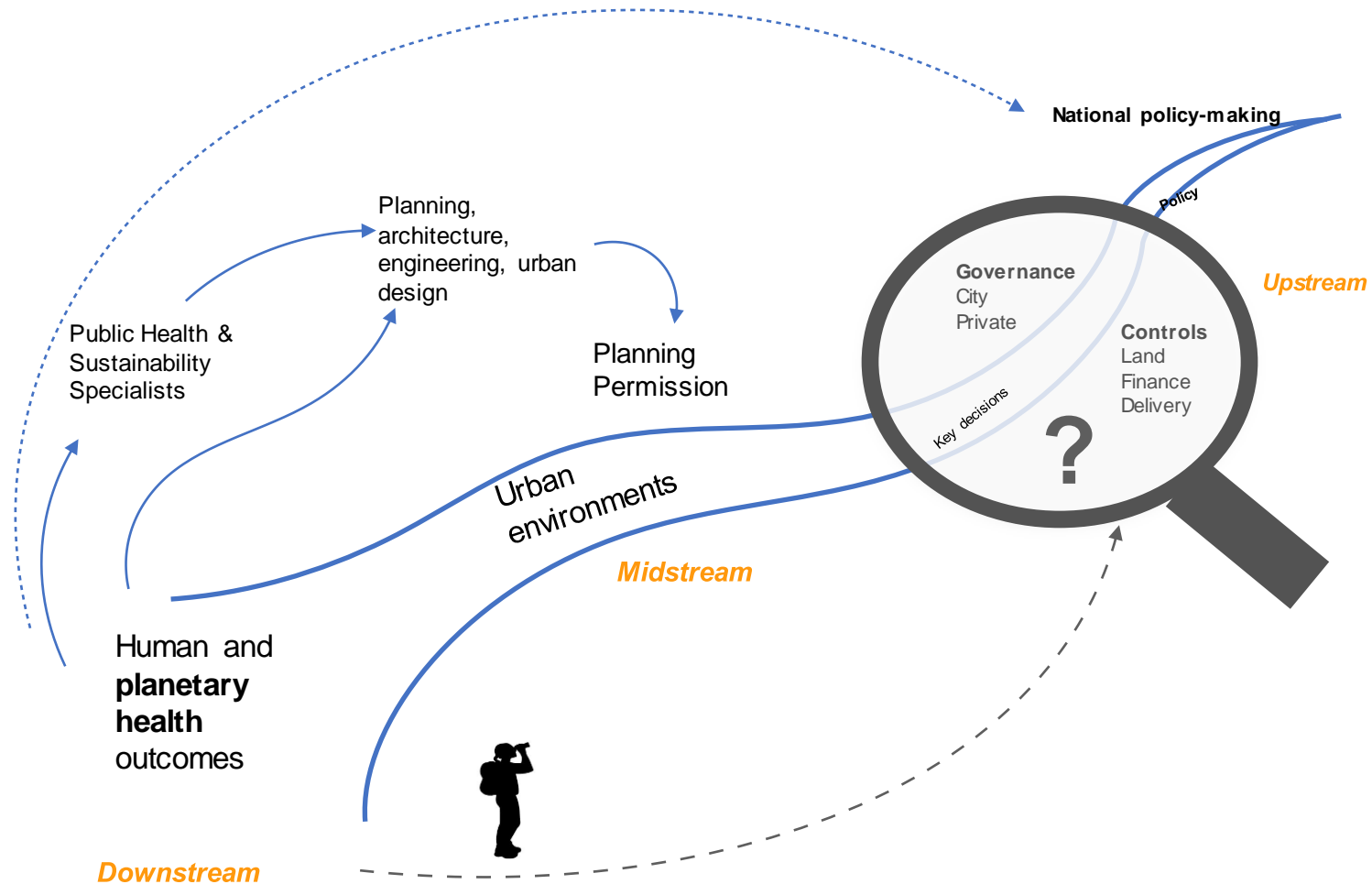
Tackling Root Causes upstream of Unhealthy Urban Development (TRUUD)

5 year research programme
Large, transdisciplinary team

TRUUD is trying to influence 'upstream' policy making:

- to increase prioritisation of health prevention in urban decision-making processes (**short-term goal**)

- to prevent non-communicable diseases (**long-term goal**)



Urban policymaking at national level

National government is one key part of the UK urban development system: it sets the context and direction of urban policy.

Key decisions for urban development are made in Treasury, Housing, Transport, Business, and Environment departments.



Key questions

1. How does the government think about health prevention currently in urban policy making?
2. What are the barriers for health prevention in urban policy making?
3. What would help urban policymakers to prioritise preventative health?

Our research suggests that:

- Preventing poor health is not an important priority for government in urban policy.
- Health is often completely absent from urban policies.
- Where it is included, it is secondary to other higher priorities.
- Health evidence is rarely considered in decision-making

“If you were to say, ‘What’s the big agenda?’ it wouldn’t be, ‘We’re going to really transform mental health,’ or ‘We’re going to really drive down obesity rates’.

Instead it’s ‘Let’s improve the natural environment’ or, ‘Let’s improve economic activity’ and the by-product of that is better health”.

(Senior civil servant, housing and regeneration)

- No shared agenda or drive for health prevention across government
- No leadership promoting health from key government offices (Prime Minister, Treasury)
- Links between health and other agendas are not well understood,
- Lack of 'systems thinking' - government silos, health prevention is seen as the responsibility of the health department.

“The challenge is that trying to address the wider determinants of health is very difficult when it falls outside the responsibility of the minister that we are ultimately working for and are accountable to”.

(Scientific Advisor on the Environment)

“I don't know that the departments would be interested to think about health, unless there was a clear lead from the Treasury that this was desirable”

(Senior Economic Advisor in Transport)

We identified the opportunity to **increase the use of health evidence** in urban policy making processes through integrating **a new economic model** into the 'Department of Levelling Up, Housing and Communities'

Incentivise urban policymakers to think about health outcomes by demonstrating:

- how preventing NCDs can help to deliver their key policy agendas
- the economic benefits across the system from improving health outcomes

Bates, G., Ayres, S., Barnfield, A., & Larkin, C. (2023). What types of health evidence persuade policy actors in a complex system?. *Policy & Politics*, 51(3), 386-412.
<https://doi.org/10.1332/030557321X16814103714008>

The elephant(s) in the room

Tackling Root causes Upstream of
Unhealthy Urban Development



Dominant thinking across government does not support upstream, policy-level preventative health

How do we challenge these 'wicked' barriers to upstream prevention and tackling wider determinants?

- Resistance to state-level intervention
- Short-termism, lack of willingness to invest in long-term health prevention, treatment is prioritised
- Centralised government, lack of devolved powers
- Lack of regulation of the private sector
- Pro-growth and market-led economic system (!)

The government has "ducked big policy interventions—on food pricing and regulation, sugar, alcohol pricing, affordable housing, and transport—in favour of a more permissive attitude influenced by industry and ideology and focusing on individual responsibility and choice, not the wider structural determinants of ill health".

Oliver, 2022, BMJ 376, DOI:10.1136/bmj.o797

Acknowledgements

This work was supported by the UK Prevention Research Partnership, an initiative funded by UK Research and Innovation Councils, the Department of Health and Social Care (England) and the UK devolved administrations, and leading health research charities.

Weblink: <https://mrc.ukri.org/research/initiatives/prevention-research/ukprp/>

