

What needs to happen to 'level up' public health?

The issue

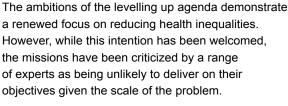
Reducing health inequalities requires upstream interventions to tackle the wider determinants of health. Wider determinants of health include things like education, employment and the places that we live and work.

The government's 2022 Levelling Up White Paper set out an ambitious plan to reduce inequalities in the United Kingdom (UK). It includes 12 'missions' through which this will be achieved. This includes missions to raise the overall healthy life expectancy by five years by 2035 and improve well-being across the county by 2030, with the gap on both measures being narrowed between the highest and lowest performing areas.

Our response

We examined what should happen in central, sub-regional and local government to make the most of the 'levelling up' opportunity. Our focus was improving the quality of urban environments, which are an important determinant of health and an important aspect of spatial disparities.

We applied data from qualitative interviews with 132 influential actors (Table 1) across the urban development system to seven principles that might underpin a successful 'levelling up' strategy1.





Martin et al. 2021. Levelling up Left Behind Places: The Scale and Nature of the Economic and Policy Challenge. Oxford: Routledge.







University consortium













Table 1: Study participants

Study participants across the urban development system					
Primary role	Public sector/ Local regional	Public sector national	Private sector	Other	Total
Property developer	5	2	24	0	31
Urban planner	15	3	5	3	26
Finance	0	3	18	0	21
Transport	6	3	3	1	13
Public Health	7	2	0	2	11
Politician	8	1	0	0	9
Environment/ Sustainability	3	2	1	1	7
Other	5	4	2	3	14
Total	49	20	53	10	132

The evidence

Our analysis reveals that long-term investment in healthy urban development could play an important role in the Government's strategy to levelling up public health. Yet, it is not currently part of the plan. We found that to 'level up' public health:

- Establishing a cross-government commitment for health prevention, led by the Prime Minister's office, would raise the profile of this agenda, create shared responsibility for health across departments and facilitate joined up working. It would need closer working between the Department for Levelling Up, Housing and Communities and the Department for Health and Social Care, including the integration of health stakeholders into other policy areas with health impacts.
- Further devolution of powers to localities and sub regional combined authorities over urban development would give local actors more power and resources to respond to local priorities. Top-down targeting of resources and solutions and centrally determined targets are a barrier to addressing local inequalities in a joined-up way is required.

- Simplifying funding mechanisms will give greater flexibility in how resources from central government are used with a move away from short-term bid-based funding, which undermines local authorities' ability to act collaboratively and innovatively over the longer-term. Targeting funding towards areas of greatest need would help to reduce disparities between local areas.
- Increasing the voice of local communities in urban development issues and more effective use of health evidence should be priorities to improve the evidence-base that informs local decision-making. The specific needs and circumstances of local areas must be accommodated to develop contextually relevant and place-based solutions.

The policy problem

The UK is characterized by substantial regional disparities, including health outcomes. There are large and increasing differences in life expectancy between and within regions which are strongly linked with deprivation and quality of place.

To achieve the missions in the Levelling Up White Paper to reduce gaps in healthy life expectancy and wellbeing, government strategies must seek to tackle the wider determinants of health, such as improving the quality of places that people live and work.

Preventing poor health through tackling the wider determinants of health is critical to 'level up' health but requires a change in current funding arrangements and increased flexibility powers for local areas. This is challenging in the context of the centralized UK system of government. The current economic situation and the substantial austerity-era cuts for public health services and prevention activities compound the challenge. It will require creative and innovative approaches for thinking about long-term health prevention that can better respond to the varying needs and circumstances of localities.



Recommendations

We've developed seven recommendations for tackling health inequalities as part of the levelling up agenda, based on our analysis.

Recommendations for levelling up public health

- Articulate a clear commitment to health prevention and tackling the wider determinants of health
- Health prevention must be designed as a cross-cutting agenda in Whitehall with clear accountability for delivery
- Engaging with local actors, including members of the public, is critical to understanding local health needs
- Local government needs policy autonomy to adopt a systems approach to addressing health inequalities
- 5. Greater flexibility in local government funding is required to enable the integration of health with other policy areas
- Place sensitive approaches are essential for places that suffer the worst health outcomes
- 7. Local health data needs to be used more effectively in urban development to highlight local health priorities

About Truud

'Tackling the Root causes Upstream of Unhealthy Urban Development' (TRUUD) is a 5-year, £6.7m research project that aims to design policy interventions to support the development of healthier urban environments. Our research seeks to promote a fundamental shift in thinking about how to prioritise healthy urban development. We are funded by the UK Prevention Research Partnership.

Contact the authors

This briefing is based on 'What needs to happen to 'level up' public health?' published in Contemporary Social Science by Sarah Ayres, Andrew Barnfield, Geoff Bates, Anna Le Gouais and Nick Pearce.