



Tackling Root causes Upstream of
Unhealthy Urban Development



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

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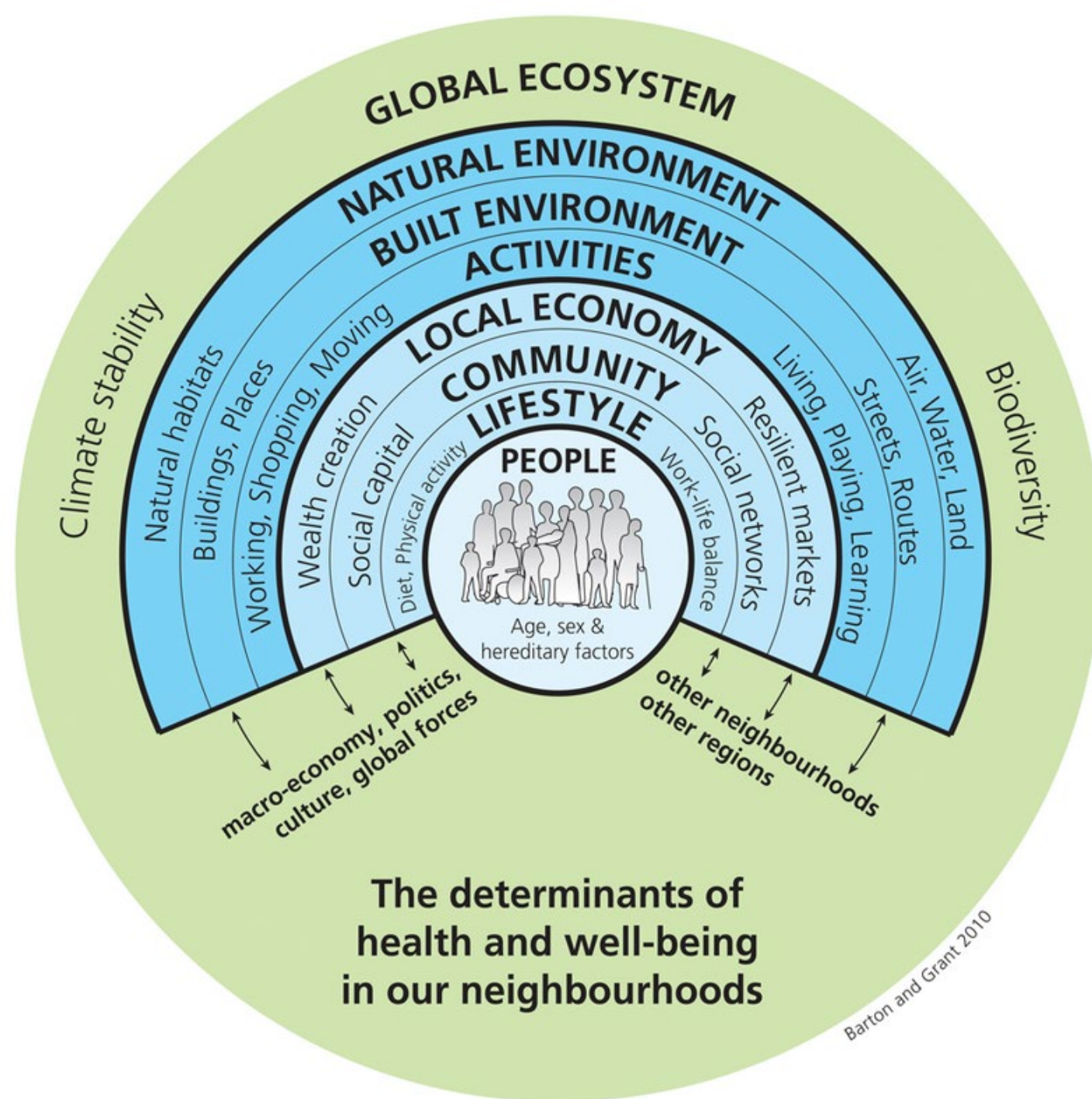
Wider determinants of health

Relevant to the Levelling up White Paper:

- 12 'missions' across a broad range of areas including employment, productivity, investment, education, living standards and health.

80% of what causes ill health is determined outside the health sector (Taylor, 2022)

Not enough focus on prevention.
Most on treatment



Levelling up public health

Health inequality:

- Life expectancy in the most deprived areas 9.7 years less for men; 7.9 years for women (ONS, 2022).
- Healthy life expectancy 20 years less in the most deprived areas (ONS, 2022).
- 1 in 8 deaths linked to air pollution (WHO, 2015).
Higher risk in deprived urban neighbourhoods: poor-quality housing, air pollution, worse transport connectivity and access to fewer and worse quality green spaces.

Economic argument:

- Lowest healthy life expectancy areas in England: >1/3 of 25 to 64 year olds are economically inactive due to long-term sickness or disability (ONS, 2017).
- The cost to the economy of ill health among working-age people is estimated to be £150bn a year (Eaton et al., 2023).



White paper health & wellbeing aims

- Narrow the gap in healthy life expectancy between the highest and lowest local areas by five years by 2030
- Raise overall healthy life expectancy by five years by 2035.
- Improve wellbeing in every area of the UK and close the wellbeing gap between the top performing and other areas by 2030.

Improvements needed





The University of Manchester



Public health

Urban planning

Public policy

Transport

Management

Real estate

Law

Behavioural science

Public involvement

How can the system of urban development decision-making be influenced to create healthier environments?

Identifying the actors and institutions

Identifying world views & perception of problem

Understanding how decisions are made within the system

Community involvement

Health economic valuation

Legal issues



Methods: Sampling and interviewing

Stakeholder type	Local/ Regional government	National government	Private sector	Third sector	Total
Property development	5	2	24	0	31
Urban planning	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	



An aerial photograph of a suburban neighborhood. The image shows a grid of streets with houses, lawns, and trees. The houses have various roof colors, including red, brown, and grey. Some houses have solar panels on their roofs. The streets are paved and have some parked cars. The overall scene is a typical suburban residential area.

What needs to happen to level up public health?

Levelling Up Left Behind Places

The Scale and Nature of the Economic and Policy Challenge

REGIONAL STUDIES POLICY IMPACT BOOKS



RON MARTIN, BEN GARDINER, ANDY PIKE,
PETER SUNLEY AND PETER TYLER

RSA Regional Studies
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Research Today. Policy Tomorrow

ROUTLEDGE

- 1 Grasping the transformative moment for local, regional and urban development policy
- 2 Establishing a clear and binding national mission for levelling up
- 3 Realising the potential of place in policymaking
- 4 Decentralising towards a multilevel federal polity in the UK
- 5 Strengthening subnational funding and financing
- 6 Embedding geography in the national state and policy machinery
- 7 Improving subnational strategic research, intelligence, monitoring and evaluation capacity

1. Grasp the transformative moment for local, regional and urban development policy

Radical step change needed: from short termism to long-term commitment to health prevention

*“...there are savings targets that have to be met today, which always trump tomorrow because the implications of not meeting savings targets to balance the books today are significant” –
Local authority, property*



Recommendation for levelling up public health:

Articulate a clear commitment to health prevention and tackling the wider determinants of health

2. Establish a clear and binding national mission for levelling up

Aligned health priorities and responsibilities across central government needed

“...when you look at some of the narrative around levelling up, it’s much more about productivity and average incomes... I think it [health] is in there in the narrative about healthier environments and healthier people, but it comes after the productivity stuff. I’d say that’s probably quite reflective of how central government thinks.” - Central government



Recommendation for levelling up public health:

Health prevention must be designed as a cross-cutting agenda in Whitehall with clear accountability for delivery

3. Realise the potential of place in policymaking

Affected publics to be engaged in 'meaningful dialogue' to meet local needs

"You hear the loudest people, that doesn't necessarily mean they're the correct people" – Local government, transport



Recommendation for levelling up public health:

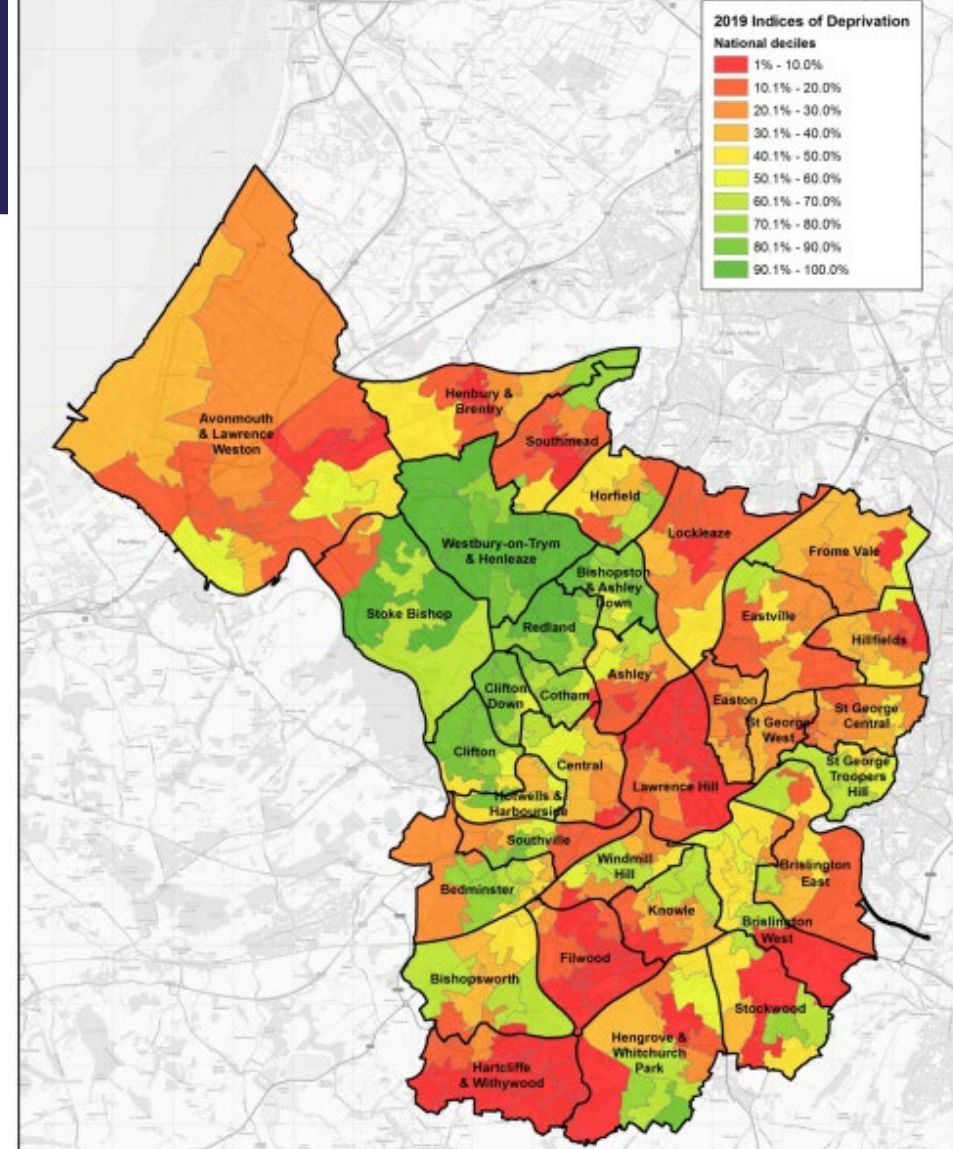
Engaging with local actors, including members of the public, is critical to understanding local health needs

4. Decentralise and devolve towards a multilevel federal polity

Lack of local power for local priorities.

National housing building targets not meeting local needs

“The power isn’t in the local authority to change some of the things that matter, the things that are determining that agenda locally, whether that be planning, regulation, or housing stock” – Government scientific advisor



Recommendation for levelling up public health:

Local government needs policy autonomy to adopt a systems approach to addressing health inequalities

5. Strengthening subnational funding and financing

Competitive, short-term funding limits collaboration and innovation to solve complex problems

Opportunity to incentivise health through bid evaluation criteria?

“...somewhere in the region of £20 billion [is distributed] through the Ministry for things such as homelessness, cladding, town centre renewal and regeneration, monies towards the new settlements and such like. But a lot of that has to be bid for and is monies that perhaps 15 years ago would have gone straight to councils and be spent by councils. But is now much more centralised as less monies are pushed out to local government.” – Whitehall official in DLUHC



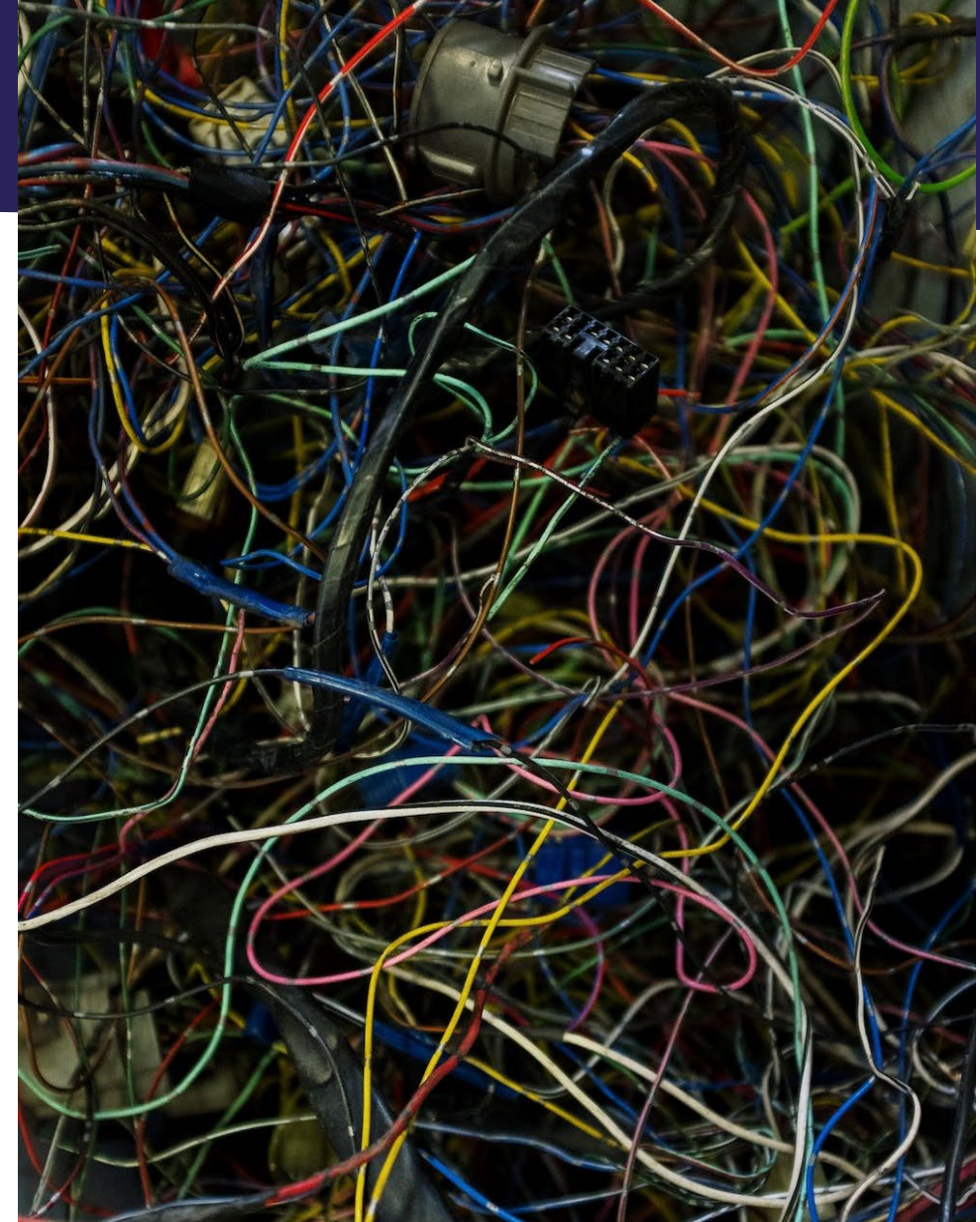
Recommendation for levelling up public health:

Greater flexibility in local government funding is required to enable the integration of health with other policy areas

6. Embedding geography in the national state and policy machinery

Challenges around complex, cross-cutting governance agendas.

“Issues around data quality, security, data sharing between partners outside a [policy] area, just the complexities of inclusion of different business systems and getting them into the data area is a barrier. Barrier after barrier.” – Local government leader



Recommendation for levelling up public health:

Place sensitive approaches are essential for places that suffer the worst health outcomes

7. Improving subnational strategic research, intelligence, monitoring and evaluation capacity

Uncertainty and inconsistency around what is 'healthy' urban development

“the lack of a common view as to what [healthy] looks like allows people to kind of come up with their own interpretation” – Whitehall official.



Recommendation for levelling up public health:

Local health data needs to be utilized more effectively in urban development to highlight local health priorities

An aerial photograph of a city, likely London, showing a dense urban area with many trees displaying vibrant autumn colors in shades of yellow, orange, and red. In the background, the city skyline is visible under a clear blue sky with a few wispy clouds. A large white rectangular box with a thin purple border is centered over the image, containing text.

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

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

Local health data needs to be utilised more effectively in urban development to highlight local health priorities

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