SOUTH EAST WALES REGIONAL COMMITTEE

HEALTH INEQUALITIES: THE LOCAL AUTHORITY PERSPECTIVE - PAPER BY THE WELSH LOCAL GOVERNMENT ASSOCIATION

Local Government and Inequalities in Health

- 1. We are very pleased to be invited to speak at this committee along with our colleagues from the NHS and Community Health Councils. The fact that local government is involved in a discussion about health inequalities is notable; before the last election it would not have been considered by central government to be necessary or appropriate to consider local government as a partner in such discussion.
- 2. But it is now widely recognised that the health of people and communities is determined far more by matters such as housing, employment, income, community safety, environment and social cohesion than by health services provided for people who are ill.
- 3. We are glad that the role local government plays in improving health and well-being has now been acknowledged by the Assembly. The WLGA continues to promote this agenda as it has done from its outset in 1996.
- 4. The Association continues to endorse the commitment demonstrated by the Government in 'Better Health Better Wales' to improving the health of the population by tackling the underlying determinants of ill health through a new approach which addresses the factors which impact on health. We are keen to ensure that local government across Wales is enabled to play its full part in achieving this objective.
- 5. The role of local government in health improvement has been well documented in our publications. In early 1998, we produced 'Picturing a Healthy Wales' which documented the health and well being role of local authorities across Wales. Later in the same year we also published the 'Atlas of Health Inequalities' in collaboration with the Faculty of Public Health Medicine which you have before you today and our policy document 'Working Together for a Healthy Wales: The Local Government Role'.
- 6. There is clear evidence of widespread inequalities in health in Wales. These largely reflect the distribution of factors that determine health. The Assembly has stated its commitment to reducing health inequalities by 'bringing the level of those with the poorest health up to those with the level of the best' and by seeking through the introduction of 'Health Impact Assessment' to adopt requirements that the impact of all policy proposals will be considered so that at the very least they are not harmful to health and if possible and appropriate they

produce the maximum benefit to health. Local government endorses this commitment and is anxious to match it at the local strategic policy level.

- 7. We do not wish today to discuss the detail of the picture of inequalities in Wales as this has been provided for us in detail in the Atlas. However it is worth re-emphasising the findings of the 'Atlas' that the most powerful determinants of health which operate at the population level and differ by geographical area are lifestyle and socio-economic factors. The report concludes that evidence gathered over the last 150years shows that preventive action upon the determinants of health at the local population level has been more effective in improving public health than the sum total of treatment and care services.
- 8. The organisations best placed to achieve such population health gain are local and central government, working with others in partnership. The arrangements we are making to establish a relationship between the Assembly and local government based on policy agreements focused on achievable outcomes will be the means of achieving this; we envisage establishing a policy agreement setting out targets for improved health and well being.
- 9. We are constructive partners with the Assembly and want to look at how we can work together to take things forward. We are aware of other work that is also being undertaken at the moment including the 'expert group on inequalities in health' of which the WLGA is a member and the Partnership Council Task and Finish Group on Health and well being. We are keen to ensure that work is co-ordinated and not duplicated.
- 10. In making our recommendations we wish to reference the Association's 'Health Strategy document' and the findings of the 'Independent Inquiry into Inequalities in Health' chaired by Sir Donald Acheson.

Recommendations

- 11. We are keen to ensure that tackling inequalities in health is seen as a central and corporate part of local government business. It should form an important part of the process currently being used to modernise local government. Health improvement and the reduction of health inequality should be integrated into corporate processes including those for Best Value, Sustainable Development, Community Regeneration, Community Planning and Community Safety.
- 12. The Association is playing an important role in developing collaboration and close partnership between the NHS and local government across Wales. This includes the establishment, backed by guidance from the Assembly, of local Health Alliance Partnerships. Such partnerships, which are led by the local authority, bring together those wider organisations involved in health improvement including the police, local businesses, colleges and most importantly communities themselves who have a vital role to play. We are seeking to encourage support for such Alliances to ensure that once established they can form a sister

partnership to Local Health Groups and assist health authorities and local authorities to develop the Health Improvement Programme and Community Planning agendas locally.

- 13. We recommend that such partnerships seek to develop local public health strategies and that their members, including local authorities, become advocates by adopting comprehensive policies to improve health e.g. healthy workplace policies, and assisting others to do the same.
- 14. We recommend that health authorities and local authorities, through such partnerships, instigate and develop local inequality audits to identify local inequalities in health between local communities. Systems should then be introduced to monitor such inequalities and assess the effectiveness of measures introduced to reduce them. This builds upon the general recommendations contained in the Acheson Report and also of the independent report 'Agendas for Change' published by the Commission on Environmental Health in 1998. We believe that the funding of such work should be a key priority for the Assembly in order to provide a clear picture at a local level.
- 15. We endorse the recent establishment of Sustainable Health Action Research Programmes (SHARP's) and the recent inclusion of 'sustainable health and well being' as one of three areas for health research in the recent consultation document from WORD. However we wish to stress that research into the wider public health agenda has, in the past, not been well funded in comparison to other areas of health research. We strongly urge the Assembly to ensure that sufficient resources are directed to this wider health agenda.
- 16. We recommend that local authorities should be closely involved in the joint planning and commissioning of health promotion activity with health authorities and trusts.
- 17. We wish to encourage the development of more partnership working in relation to public health improvement through joint appointments and secondments. We recommend that local government public health professionals such as environmental health officers be used to advise health authorities, local health groups and trusts.
- 18. We recommend that the public health workforce in Wales be developed, encouraging the establishment of a wider public health team of local government officers, public health consultants, community nurses and health promotion specialists.

Key Recommendations for the Assembly

- 19. We have acknowledged the commitment already given to the public health agenda by the Assembly and the personal commitment of the Assembly Secretary for Health and Social Services. We recommend that the following action would further enhance the efforts being made to remove inequalities in health:
 - Establish appropriate corporate political and administrative arrangements to support the

delivery of the public health agenda across Wales.

- Ensure that local government elected members are appointed to serve on Health
 Authority and Trust Boards; and on Local Health Groups. Cross representation between
 local health groups and health alliances should also be encouraged. This would remove
 any barriers to partnership working.
- Fund a public health post in the Welsh Local Government Association to further develop the local government input into health improvement. The Scottish Parliament has funded a similar public health post in the Convention of Scottish Local Authorities (CoSLA).
- Give full support and adequate resources to the development of the Wales Centre for Health and the National Network for Health.
- In encouraging partnership and collaboration acknowledge and support the development of the Welsh Collaboration for Health and Environment as a role model.
- Make health improvement and the reduction of inequalities in health a central part of the Assembly's commitment for achieving Sustainable Development.
- Publish a report analysing demands on the NHS and explaining the underlying causes and sources of the demands.
- Work with local government, through policy agreements, to focus attention on finding solutions to the problems faced by areas of health inequality.
- In setting its budget make provision for additional resources for local government investment in improving public health and well being.