Public Health: Shifts in authority, responsibility and power

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Future health challenges

What will be the major challenges to health in 2020 and beyond?
Social and Technical Evolution – Biological Adaptation

The Shape of Things to Come - cover of The Economist, Dec 13-19 2003
Obesity - the cost

• 21 million sick days a year
• 35,000 deaths a year
• 45,000 lost years of working life
• Obesity shortens life on average by nine years
• £0.5+ billion treatment costs to the NHS
• Over £2 billion a year impact on the economy as a whole
Future Challenges

- new and re-emerging communicable diseases (TB, HIV and Aids, SARS, H5N1)
- more rapid transmission
- increasing demands upon the health care system
Future challenges

• New Health Technologies
  - better vaccination and immunisation
  - more effective screening = earlier detection of avoidable disease
  - better medical interventions may alter perceptions of risk (affordability?)
  - telediagnosis, prevention and rehabilitation
  - mapping the Human Genome
Demographic Changes

- increase in older citizens
- smaller proportion of people who are ‘economically active’
- increasing migration within countries and between continents and ethnic groups
- redistribution of skills across regional and national boundaries
A Healthier Future?

Managing the politics
- National vs Local priorities
- Inter-organisational e.g. NHS, Two-tier local government
- Professional view vs Elected Members
- Interprofessional competition
- Public opinion and expectations
- Annual DPH Report

Planning and delivering the interventions
- Strategic planning
- Common interpretation of JSNA
- Joint commissioning with CCGs (possibly NHS Trusts)
- Commissioned or managed PH services
- Matrix delivery (vertical + horizontal)
Other Challenges!

- Integrated approach to PH (three domains)
- Using the evidence
- Settings and sectors
- NHS leadership for PH
- Innovation vs. Commissioning for safety (Innovation Fund?)
- Short timeframes for success (Health Premium)
- Inequalities
- Working beyond LA boundaries (NHS, CCGs, other sectors)
- Resources
Contentious Issues?

- Politically difficult health issues (e.g. sexual health services)
- Evidence-based PH approaches vs. Political philosophy
- Use of Health Impact Assessment
- Openness and Transparency
- Managerial accountability (PHEngland v Local Authority)
- Decision-making culture
Health in the Future

1. Economic growth and sustainable development

2. Health care provision versus action on the fundamental determinants of health

3. Potential adverse effects of IT and the obvious advantages of better communication

4. Energy demand versus environmental impact

5. Improvements for the affluent at the expense of the worst-off
Future Health Challenges

• Modern day NCDs and so-called ‘lifestyle’ issues
• Re-emerging communicable diseases
• Emergency and disaster responses
• Impact of climate change
• Emerging communicable diseases
“I have a vision for the future as well as the past!”
Underpinning Principles

• Empower local authorities
• Enable professionals
• GP Commissioning
• New ideas and innovation
• Evidence based approaches
• Increased resilience of the PH system
• Health protection – nationally led
• Health improvement – local leadership
• Action on wider determinants
• All social and economic sectors
• NHS role – screening, vaccinations, long term conditions
• Life course approach
• Early years a priority
• Third Sector – services, advocacy, catalyst
• Better local/public accountability/sensitivity

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RSPH www.rsph.org.uk
Map the Community’s Assets

- facilities and infrastructure
- networks and opinion formers
- community organisations
- communication structures
- local identity
- media
If we could give the 20% most disadvantaged in society the same living conditions and circumstances as the 20% most advantaged, we would transform health and the demand upon the health services
What’s in the toolbox?
1.17 Which policy tools have been or will be used intentionally to improve child and adolescent health? (Please circle or tick.)

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<thead>
<tr>
<th>LEGISLATION</th>
<th>REGULATIONS</th>
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<td>(e.g. smoking in public places, wearing seat belts, environmental improvement)</td>
<td>(e.g. consumer protection, food labelling, industrial and vehicle emissions, speed limits)</td>
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<tr>
<th>ORGANISATIONAL CHANGE</th>
<th>PUBLIC EDUCATION</th>
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<td>(e.g. new services, improved access)</td>
<td>(e.g. mass media campaigns)</td>
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<th>PROFESSIONAL DEVELOPMENT</th>
<th>BUDGET ALLOCATION</th>
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<td>(e.g. training of health professionals, professional regulation)</td>
<td>(e.g. increased health or education budget)</td>
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<tr>
<th>FISCAL MEASURES</th>
<th>WELFARE POLICY</th>
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<td>(e.g. taxation, corporate subsidies, financial penalties, investment funds, tax exemption)</td>
<td>(e.g. food coupons, welfare benefits, housing support)</td>
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<tr>
<th>RESEARCH</th>
<th>PERFORMANCE RELATED PUBLIC SERVICE FUNDING</th>
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<td>(commissioned research, information dissemination)</td>
<td>(e.g. funds follow targets)</td>
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<th>CURRICULUM DEVELOPMENT</th>
<th>ENVIRONMENTAL CHANGE</th>
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<td>(e.g. primary and secondary school knowledge and skills development)</td>
<td>(e.g. transport planning, water and sewage supply, playground design)</td>
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If you always do what you have always done, you will always get what you have always had
Make it meaningful!

- Case studies
- Local and personal
- Understandable – the Jumbo Jet syndrome
- Opinion formers
- League tables and comparisons
- Costs of doing nothing
- Emotional appeal
- Analogies, symbolism, and values
- Data and evidence
"I keep hallucinating, doctor... Look! There it goes again... a nurse!"
Thank you!
Conclusions

A ‘bottom-up’ approach

"It's been like this ever since we adopted that bottom-up not-top-down approach"

SARP
Keep Fit
Class