

# Making Devolution Work

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Health Inequalities:  
some thoughts on causes, responses and policy  
dilemmas

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# Overview

- Health Inequalities
  - Causes and policy evidence
  - Proximal and Distal
  - Path Dependency and Timescales
  - Social Networks
- Policy responses
- Policy Rhetoric
- Policy Constraints and Opportunities



# Health Inequalities

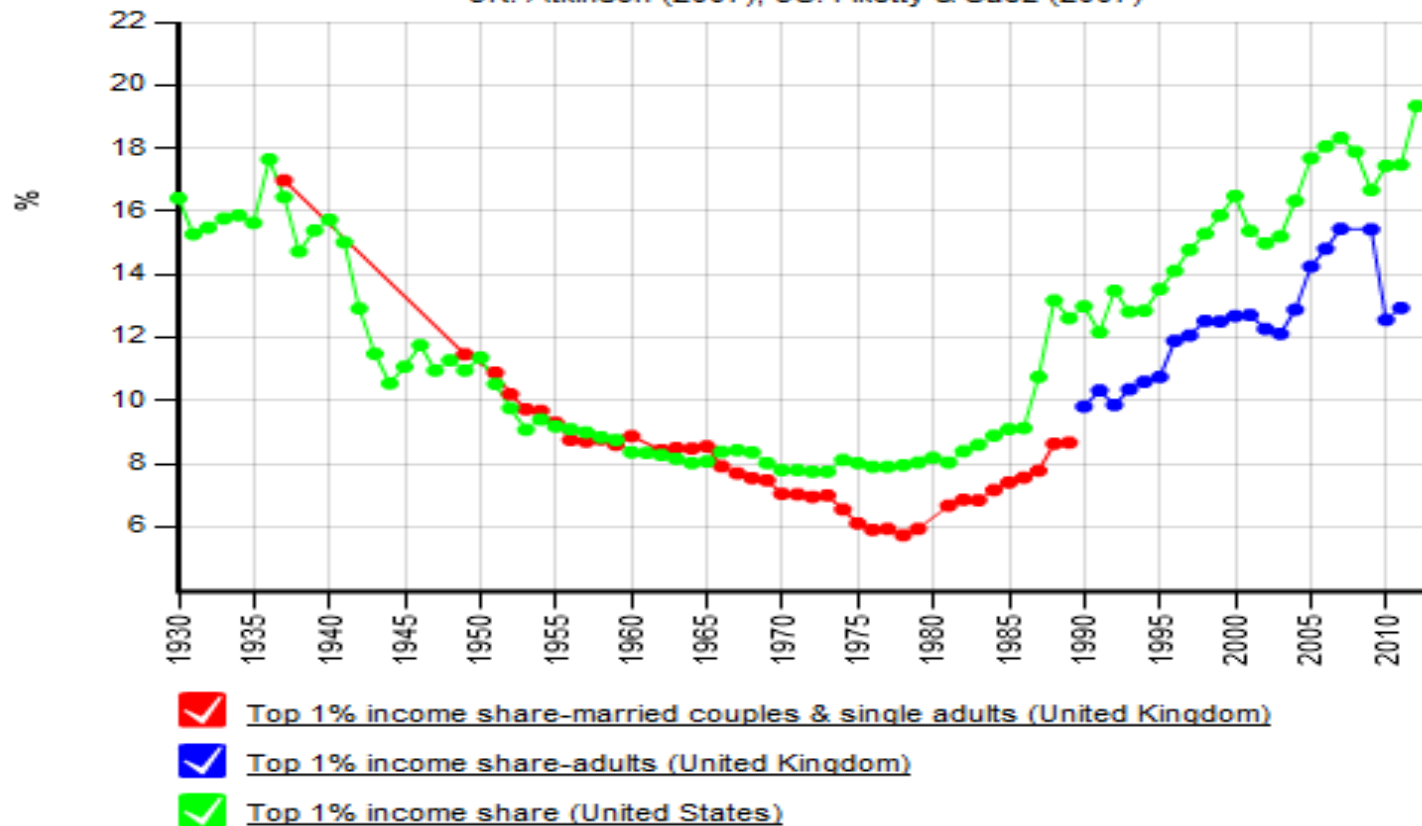
- Long standing evidence for Health Inequalities (class, status, place, ethnicity, gender)
- Wider social determinants of health *directly* affect health (Marmot Review 2010).
- They ALSO work *indirectly* to influence people’s lifestyle risk-taking behaviour and their ability to maintain changes in their behaviour.
- Evidence that health behaviours cluster together in the population and *multiple lifestyle* risk patterns have changed over *time* between different population groups.
- While individual choices are important - in the long term, the most important actions will reshape environments (social relations, social networks, social capital and environmental context).

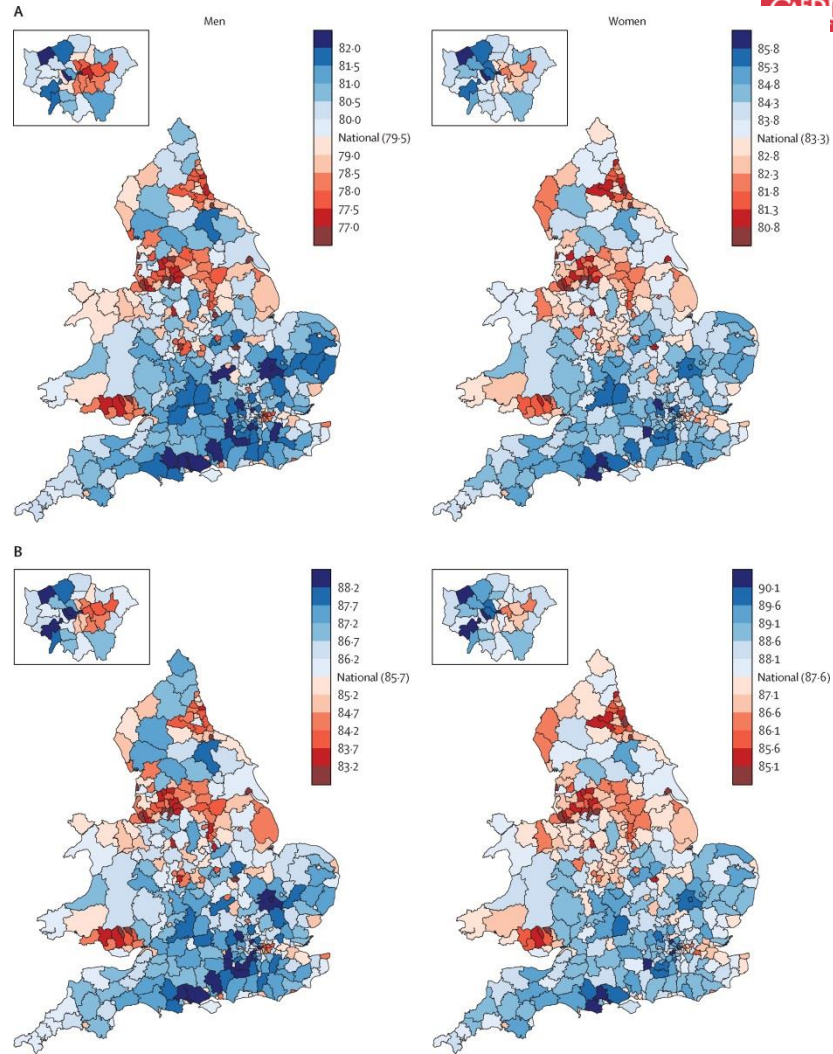


# Context

Top income shares. 1930-2012

Sources: The World Top Incomes Database. <http://topincomes.g-mond.parisschoolofeconomics.eu/>  
UK: Atkinson (2007); US: Piketty & Saez (2007)





Source: Bennett et al. (2015) The Lancet DOI: (10.1016/S0140-6736(15)60296-3)





# Policy Responses

- **Consensus** exists among researchers:
  - a more progressive distribution of income/wealth
  - greater investment in services for deprived communities
  - regulatory policies to limit the impact of lifestyle and behavioural risks.
- **BUT** support for proposals varies and depends on:
  - whether they are asked to express their expert opinion **or**
  - to comment on the strength of the available evidence

Source: Smith and Eltanani (2014), Journal of Public Health



# Radical Responses

- Atkinson's 15 points (e.g statutory living wage, minimum inheritances, guaranteed public employment, 65% top rate, progressive residential property tax, return to universal child benefit)
- Foundational Economy (supply chains, ownership, not for dividends, social licencing)
- Global Finance (tax havens, corruption, capital flows)





# Potential Local Responses

- Living wage policy
- Focus resources on improving life chances in early childhood
- Implement 20mph speed limits where 30mph ones have usually been in place
- Take a 'health first' approach to tackling health-related worklessness
- Participatory budgeting
- Improve the employment conditions of public sector workers
- age-friendly environments
- Make good use of evidence

• Asset based approaches (an addition to the list)

Source: British Academy (2014) Nine local actions to reduce health inequalities





# Welsh Government Budget 2015/16



Dept and Managed Expenditure (resource and capital)	£Billion
Health and Social Services	6.9
Local Government	4.5
Communities and Tackling Poverty	0.7
Economy, Science and Transport	1.1
Education and Skills	2.0
Natural Resources	0.4
Central Services and Administration	0.3
<b>Total</b>	<b>15.9</b>



# Devolved Context

- Government of Wales Acts 1998 and 2006
- Referendum 2011
- Silk Commission
- The Social Services and Well-being (Wales) Act received Royal Assent and became law on 1 May 2014
- The Well-being of Future Generations (Wales) Act 2015 (April 2015)
- Public Health (Wales) Bill – June 2015



# Austerity Bites

- Devolved institutions financed almost exclusively through a block grant which is determined by the Barnett Formula
- Devolved bodies have no control over the national debt.
- Austerity will continue to cut Departmental Expenditure Limits, and will impact through the Barnett formula
- Room for manoeuvre is limited: May change the timing of spending or prioritise budgets differently but otherwise...



# Examples from Wales

- *Raft of Community based initiatives* (Communities First)
- Welsh Assembly Government's (WAG) *Inequalities in Health Fund* (liHF) 2001–08 (Criticisms – ‘good practice’ is often difficult to achieve, and somewhat simplistic incentives are often subverted locally (Longley et al 2011)
- Fairer Health Outcomes For All, Health Strategic Action Plan (2011)
- *The Children and Families* (Wales) Measure 2010 places a duty on Welsh ministers to publish a child poverty strategy for Wales, and sets specific objectives for improving the outcomes of children and families living in low-income households (but how effective?)
- *Prudent Healthcare* (WG, 2014). Prudent Healthcare is built around a set of principles for service providers to apply; Do no harm, Carry out the minimum appropriate intervention, “Only do, what only you can do” principle, Promote equity, Co-production.
- *Public Health Bill* (2015). Restrict the use of tobacco and nicotine inhaling devices (such as e-cigarettes) in enclosed public places, create a national register of retailers of tobacco and nicotine products, prohibit the handing over of tobacco and nicotine products to under 18s. (*Public Health Regulation*)





# Conclusions

- Health Inequalities have distal, proximate and complex causes
- Health Inequalities seen by some as policy failure
- Local Devolved Policies are limited by fixed Westminster budgets and the Austerity Agenda
- But there is space for radical ideas





