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Making the difference: Tackling health inequalities in Wales

Priorities for the first year of the new Welsh Government

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This short paper offers ideas for initial steps that an incoming Welsh Government could take in their first year to respond urgently to health inequalities and make the greatest possible impact by coordinating renewed commitment from all partners.

The ideas outlined in this paper focus on ways of working that would ensure our collective impact is amplified.



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The challenge

The incredible hardship inflicted by the COVID-19 pandemic has not been felt equally by individuals, families, and communities across Wales. For some, the consequences have been devastating. During the first phase of the pandemic:

- ◇ the [mortality rate involving COVID-19](#) in the most deprived areas in Wales was nearly twice as high as that in the least deprived areas
- ◇ 33% of [COVID-19 cases admitted to critical care](#) were from ethnic minority communities, compared to only 14% of the total population
- ◇ 22% of households in Wales [lost at least 20% of their weekly income](#) between February and April 2020.

This challenge is sadly not new. 2021 marks the 50th anniversary of the publication of Dr Julian Tudor Hart's paper on the Inverse Care Law, and while progress has been made in the last fifty years, the scale of remaining challenge has been laid bare by the impact of the pandemic. Improvements to life expectancy have stalled in recent years, and the health gap has grown between wealthy and deprived areas.

The conditions that support us to live healthy lives are broad: our income levels; our level of education and skills; the availability of good work; the quality and security of our housing and our surroundings; access to public services; our social connections to one another; regular physical activity and safe access to outside space; among many others.

Inequalities arise because of the unfair and avoidable differences in these conditions between different groups within society.

Taking action

Inspired by the research of Dr Julian Tudor Hart, **Deep End general practice** takes a whole-person approach to health care which understands the context that is leading to health outcomes. A [Scottish version of the scheme](#) has seen community link workers, addiction support, and financial management advisors based within general practice to support and signpost patients in economically deprived locations.

Despite the incredible hardship caused by COVID-19, there is an opportunity to take a fresh look at old challenges: to raise our ambitions, come back stronger, and make sure the benefits are felt equally by all members of our society.

The scale of the challenge can appear daunting but step by step changes can make a real difference. For example, the 2007 smoke-free legislation has seen the number of adults smoking in Wales decline from 24% to 18% and the trend continues downward.

Taking action

Compassionate Community approaches transform the way people access and rely on health and care by [integrating community development initiatives with established services](#). The approach emerged as a public health response to support people and their loved ones at the end of their lives, but the benefits extend to whole communities by prioritising the value of social connectedness alongside health. In Wales, examples make the most of existing social and caring networks as well as connecting people with existing non-medical community assets, often at a primary care cluster level, such as in the [Cardiff South-West Cluster Model](#). Specific interventions and focus are often given to significant transitions, such as providing an integrated approach to hospital discharge or planning for future care. Existing models across the UK have demonstrated a reduction of [14% in unscheduled hospital admissions](#) as well as improved community wellbeing.

The opportunity

The scale and nature of the challenge needs a coordinated response from all of us. Tackling health inequalities is not in the gift of any one body or organisation, and while high-quality, responsive health services are an essential component, the NHS alone cannot deliver the change needed.

Taking action

[Walking and cycling can play a vital role](#) in supporting healthy life expectancy. [Research into the Sustrans Connect2 programme shows that](#) the construction of safe walking and cycling routes at scale can improve population health and reduce health inequalities by supporting physical activity among disadvantaged groups. This can include physical activity among older people, people living in deprived areas and people living with a disability or long-term illness. When walking and cycling routes are built or improved in areas where levels of walking and cycling are low, relative increases in levels of physical activity can be large. This spells out the role that walking and cycling can play in responding to Covid-19 and in addressing wider inequalities.

In the first year of the new Senedd term, the next Welsh Government should take significant steps. The Welsh NHS Confederation's health and social care Policy Forum has [called on the next Welsh Government](#) to:

Provide a cross-governmental, whole-sector response to physical and mental health inequalities to create the economic, social, natural and home environment that supports positive wellbeing throughout the life-course for all people in Wales and reduces inequalities for the next generation.

This is not a new proposal. There have been many detailed and well-evidenced reports on these issues in recent years, notably [The Marmot Review](#). In the past year, many reports have also evidenced the need and called for system-wide action on health inequalities including the [Welsh Health Equity Status Report](#) initiative, [Placing health equity at the heart of the COVID-19 sustainable response and recovery](#) (Public Health Wales and Welsh Government); [Mitigating the impact of COVID-19 on health inequalities](#) (British Medical Association); and the [2020 follow up to the original Marmot review](#).

Taking action

Good quality, affordable social homes promote people's health and independence, yet the consequences of poor housing currently costs the [NHS in Wales £95 million a year](#). Research shows there are [39% fewer hospital admissions for cardiorespiratory conditions and injuries](#) for those with upgraded houses. And as people's needs change, the right housing support and investment can help people remain independent in their own homes, near the people and places that matter most to them. For [every £1 spent on home adaptations](#) prior to hospital discharge, there is a saving of £7.50 for health and social care, and home modifications result in 26% fewer injuries requiring medical treatment caused by falls per year.

Integrated and coordinated action on shared challenges is a central theme of Welsh legislation (see: Well-being of Future Generations (Wales) Act 2015, and the Social Services and Well-being (Wales) Act 2014) but too often, collaboration is still limited and patchy. Prevention and early intervention also are central themes across Welsh public policy, but too great a proportion of funding is still directed towards tackling crises.

Effective action to address health inequalities requires bringing Wales' collective resources together in a focused, coordinated and shared effort. The next Welsh Government must bridge the gap between policy and delivery and bring people together to tackle this injustice.

The action needed

1. Welsh Government leadership

Sustained, focused and coordinated action across all Government departments is required to tackle the root causes of health inequalities. **A cross-government group of senior officials, reporting directly to the First Minister, should be established to develop and drive an ambitious, cross-sector strategy and delivery plan to tackle health inequalities.** This would help to ensure that health inequalities are a priority running through all government activity and all delivery partners in Wales.

Arrangements should include:

- ◇ a published strategy and delivery plan with clear, measurable long-term outcomes and milestones that provides an ambitious and realistic route-map to progress
- ◇ annual reporting on progress, drawing on actions taken across government departments and delivery partners, using common performance measures that focus on quality-based outcomes, prevention, and whole-system collaboration

- ◇ regular, transparent population data collection that allows for meaningful assessment of the impact of actions on different communities and socio-economic groups
- ◇ robust, independent scrutiny arrangements. The Senedd should implement effective arrangements for scrutiny of cross-portfolio issues.

2. Invest in preventing health inequalities

The Welsh Government should rebalance spend away from crisis to long-term prevention over the next Senedd term and provide the necessary transition funds to support the long-term shift to a preventative approach. Investment should be targeted at infrastructure and services that offer sustainable solutions to the underlying causes of health inequalities.

Taking action

Cancer Research Wales has prioritised **cancer inequalities** as a key area for research. Cancer incidence and mortality for some cancers is up to 25% greater in deprived areas compared to more affluent areas. The charity has funded 'TIC-TOC', a '[Targeted Intensive Community-based Campaign to Optimise Cancer Awareness](#)' to address the limited success and transient nature of conventional awareness campaigns which often miss the targeted group. Led by Cardiff University, this research will create networks consisting of community cancer champions, primary care leads and strategically positioned Rapid Diagnostic Centres to dismantle barriers and improve health seeking behaviours that lead to cancer inequalities in Wales. The outcomes of this research will be applicable to other health conditions.

The [recent inquiry by the Senedd Public Accounts Committee](#) found that public bodies have not done enough to build awareness and understanding amongst their service users of the shift to sustainable development across public services. Efforts must be made to engage the public meaningfully on this approach and its long-term benefits.

Priorities should include:

- ◇ expansion of **responsive, preventative, community-based support** to promote good physical and mental health. This includes addressing loneliness and social isolation at all life stages.
- ◇ good quality **homes** conducive to good health outcomes at all stages of life, and as people's needs change.
- ◇ **education and skills** at all ages, and action to prioritise **fairly paid good quality jobs**.
- ◇ accessible, affordable sustainable **transport** options.
- ◇ affordable green **energy** solutions and support for those in **fuel poverty**.
- ◇ safe, local green **recreation space** with sport and fitness facilities that promote physical activity for all.
- ◇ clinically led, multidisciplinary **nutrition and weight management support services** that are accessible to everyone in Wales.

- ◇ resources to support **direct engagement with under-represented groups**, especially those experience poor outcomes.

Taking action

Guys and St Thomas NHS Foundation Trust has an award-winning **Essential Apprenticeship Scheme**. This programme was a bronze winner at the International Learning Award for Apprentice Programme in 2015. Over 95% of apprentices have successfully transferred into permanent roles within their capital, estates, facilities, IT and other non-clinical directorate and services.

3. Making this time count: working in partnership

To make substantial gains on health inequalities, it needs to be as easy as possible for everyone to play their full role. **The Welsh Government should facilitate an enabling, responsive, and innovative operating environment** that includes citizens, communities, public bodies, not-for-profit and third sector partners, and the private sector.

Taking action

Social Care Wales has established a multi-sector group, the **Resourceful Communities Partnership**, to share knowledge, evidence, practice, and influence about improving well-being in communities. Alongside this they have developed a framework to support local inclusive action on well-being. This builds on positive community action during the Covid-19 pandemic while recognising that not all communities have experienced equally positive impacts. The framework aims to help structure conversations by identifying some of the key areas of focus and enablers that support community resourcefulness.

Priorities should include:

- ◇ **giving people a greater voice in defining solutions:** efforts should be focused on engaging the public as partners in transformation and recognising that they are the experts in their communities. They should be empowered to find solutions and enabled to make positive changes at a national, regional, and local level.
- ◇ **removing structural barriers:** relevant cross-sector performance measures should be aligned and used as measures to track progress in reducing health inequality.
- ◇ **making partnerships fit for purpose:** harnessing the potential contribution of all partners around the table, it should be made easier for non-statutory, voluntary and community partners and citizens to share their expertise and resources when identifying local priorities and solutions. This will enhance our collective ability to implement effective solutions at speed. The Welsh Government should clarify how existing partnership structures (eg Public Service Boards and Regional Partnership Boards) could be more accountable to the communities they serve.

This document is endorsed by:



Coleg Brenhinol y Meddygon (Cymru)

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Gofal a chefnogaeth drwy salwch terfynol
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