

**Building on the work of Sir Donald Acheson’s Independent Inquiry into Inequalities in Health in 1998, the cross-cutting review on tackling the causes of health inequalities considered the contribution that high-quality public services can make to the Government’s objective of narrowing the health gap, in childhood and throughout life, between socio-economic groups and between the most deprived areas and the rest of the country. It has recommended a comprehensive approach to tackling inequality in health outcomes through improved focus of programmes and resources-in particular education, health, and housing-as well as increased efforts on smoking cessation, better nutrition and exercise, and other preventative health care services.**

**29.1** Over the last twenty years, there have been significant improvements in life expectancy and health status. However, inequalities in health outcomes persist, and in some cases have widened over this period. There are significant differences between socio-economic groups, and the multiple problems of material disadvantage facing some communities have caused wide geographical variations in health.

#### **Delivering the Wanless Report**

**29.2** The need for greater efforts to improve the health of those groups who currently experience the worst health outcomes was highlighted in Sir Donald Acheson’s Independent Inquiry into Inequalities in Health in 1998. The Wanless Report, *Securing our Future Health: Taking a Long-Term View*, published in April 2002, subsequently concluded that additional resources should be directed to public health, targeted at those interventions where the long-term impact on poor health will be greatest. This will contribute to delivering the ‘fully engaged’ scenario envisaged by Wanless, which projects savings of some £30 billion in resource needs by 2022. The settlement for the Department of Health is based on the delivery of the fully engaged scenario.

#### **The review**

**29.3** While the Government has already done much to tackle inequalities in health, it is clear that an effective cross-government approach is required to achieve further significant progress in tackling the health gap. The review has considered the contributions that high quality public services can make to closing the health gap. Experts from across government, academic institutions and local government have been closely involved with the review. Its work has also been informed by a public consultation undertaken by the Department of Health with practitioners throughout the country.

## **OUTCOMES**

#### **Work underway**

**29.4** The review has highlighted the importance of the contribution to tackling health inequalities that is being made by other major programmes of work the Government has already put in hand including the eradication of child poverty, the National Minimum Wage and the New Deal, the National Strategy for Neighbourhood Renewal, the modernisation and expansion of NHS primary care services in disadvantaged communities, and the strategy to reduce teenage pregnancy rates.

#### **A long-term strategy**

**29.5** The review has identified the need for a long-term government-wide strategy to ensure that health inequalities objectives are reflected in departments’ mainstream programmes, including those of the NHS and Department of Health, the Department for Education and Skills, the Home Office, the Office of the Deputy Prime Minister, the

Department for Work and Pensions and the Department for Environment, Food and Rural Affairs. As part of the strategy, the review identified a number of specific actions for the Spending Review period, including:

- a stronger focus on deprived areas in the allocation of resources for the NHS to improve access to services, and for schools in order to narrow the educational attainment gap;
- better preventative health care services for disadvantaged communities, particularly an expansion in smoking cessation advice and support;
- targeted services for disadvantaged communities to help families improve their children's nutrition and establish healthy eating patterns early in life;
- an expansion of initiatives to raise levels of physical activity in disadvantaged communities, with a focus on encouraging children to develop active lives; and
- improved housing conditions for families with young children and for elderly people.

**Future work needed on early years development**

**29.6** The review highlighted the importance of narrowing the gap in early years development and subsequent educational attainment of children from disadvantaged backgrounds compared with their more affluent counterparts. The development of the National Service Framework for Children will consider how the lessons of Sure Start can be rolled out throughout the country.

## SPENDING PLANS

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**Coordinating delivery of the review's conclusions**

**29.7** The review has focused on improving the coordination and targeting of mainstream public services to reduce health inequalities, and implementation of a long-term strategy, which will be overseen by a ministerial committee. Information on the strategy to tackle health inequalities and the delivery plan for the Spending Review period will be made publicly available. Local level action, which will be reflected in the NHS performance management framework and the National PSA for Local Government, will be coordinated principally through Local Strategic Partnerships.

**NHS expenditure on health inequalities**

**29.8** The formula for distributing NHS resources to different parts of the country is currently under review and a revised version will be agreed in the autumn for use from April 2003. Reducing health inequalities will be a key criterion in the new formula. Primary Care Trusts will be held to account through the NHS performance management framework for using their devolved resources to tackle health inequalities, as one of the Department of Health's PSA priorities.