The health and well being of today’s children and those children when they become adults depend on us having the courage and imagination to do things differently, to put sustainability before a narrow focus on economic growth and to bring about a more equal and fair society.’ (Michael Marmot, BMJ Feb 2010)

BACKGROUND - The global context…

The WHO report “Closing the Gap in a Generation” was published in 2008 the report was chaired by Sir Michael Marmot. This report was significant as it called for global action in tackling the social determinants of health with the aim of achieving health equity. The report looked at the health of populations within societies and how fairly health is distributed.

This report was fuelled by the knowledge that health inequity is avoidable. Social disadvantage will mean that life chances and expectancy will be lower for individuals who are born into poorer social environments. Throughout the report addressing the issues of inequality and inequity is seen as matter of social justice.

Inequalities are evident throughout the lifespan and across all areas of life from health and wellbeing to education, employment, home ownership, access to transport and diet to name but a few. The lower the socioeconomic position the worse the health of the individual. This is not just true in poor countries, all countries show that the those with lower income have poorer health.

The impact that these inequalities have for individuals, the communities and the societies in which they live is negative. The report concluded that inequities in health arise because there is an inequitable distribution of power money and resources. The result is that those who are at the lower end of the social scale pay a heavier price in terms of health and well being compared to those at the top.

“Closing the Gap in a Generation” gave a global framework demonstrating how to start to address health equity on a global scale.

MARMOT REVIEW - The brief…

Sir Michael Marmot was asked by Alan Johnson (Labour) the Health Secretary to lead a review based on the best available evidence to tackle inequalities in England. This review was launched in February 2010 and is a framework in which inequalities could be addressed in England. As with the global report social justice is a high priority. Inequalities do not happen by chance but are inherent in the society in which we live. Marmot talks of addressing the inequalities by proportional universalism which targets the areas of disadvantage but addresses the same issue across society as required. The rationale for this approach is that only targeting the disadvantaged will only benefit a small pocket of the population. Fair Society, Healthy Lives suggests 6 key policy objectives to reduce health inequalities.

The Aims…

1. To improve health and well being for all
2. To reduce health inequalities.

The Policy Objectives…

1. Give every child the best start in life
2. Enable all children young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill health prevention

www.cdhn.org
The Marmot Review highlights the importance of a vision and a systematic approach on a large scale is what will yield lasting results. Interlinkages between projects, strategic vision and a systematic approach on a large scale is what will yield lasting results. Deprivation can impact on health and wellbeing in many ways, resulting in lack of social support and low satisfaction with the neighbourhood, feelings of financial strain, low self esteem, unhealthy lifestyle choices and risk taking behaviour. “Deprivation can impact on health and wellbeing in many ways, resulting in lack of social support and low satisfaction with the neighbourhood, feelings of financial strain, low self esteem, unhealthy lifestyle choices and risk taking behaviour.”

NI Context

The gradient in Northern Ireland
Those in the more deprived areas of Northern Ireland have:
- Lower life expectancy
- 66% higher rate of respiratory mortality
- 65% higher rate of lung cancer
- 73% higher rate of suicide
- 121% higher rate of alcohol related death

(NI Health and Social care Inequalities Monitoring System, bulletin 2009)

The Public Health Agency has condensed Marmot’s 6 objectives to 4, to address health inequalities in Northern Ireland:
1. Give every child and young person the best start
2. Ensure a decent standard of living for all by increasing income and reducing costs for vulnerable groups
3. Build sustainable communities
4. Make healthier choices easier

Currently a new strategy for health is being developed. The strategy will be based on the values, aims and principles of Investing for Health. It will be a high level cross government outcome based framework. It aims to:
- Improve overall health in Northern Ireland & reduce health inequalities
- Focus on the determinants the evidence base has shown to be most powerful in reducing health inequalities
- Adapt a life course approach
- To align with and enhance other strategies & policies to make the best use of available re sources.

Your Health Matters:

Annual Report from Chief Medical Officer, (2010)

Dr Michael McBride addresses the issue of deprivation and health inequalities.

References
DHSSPS(2011) Your Health Matters
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Investing for health

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