

In relation to this presentation it should be noted that:

- "These slides were prepared by the Chief Medical Officer to be delivered in a conference setting. The limitations and caveats on the data were communicated by the CMO during his presentation. If you were not at the briefing then you may not be aware of the full context"



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Addressing Health Inequalities

**Dr Michael McBride
Chief Medical Officer
24 November 2010**



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Overview

- A Picture of Health
- Health Inequalities in Northern Ireland
- What we've been doing
- New evidence/thinking
- Where next



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A Picture of Health?

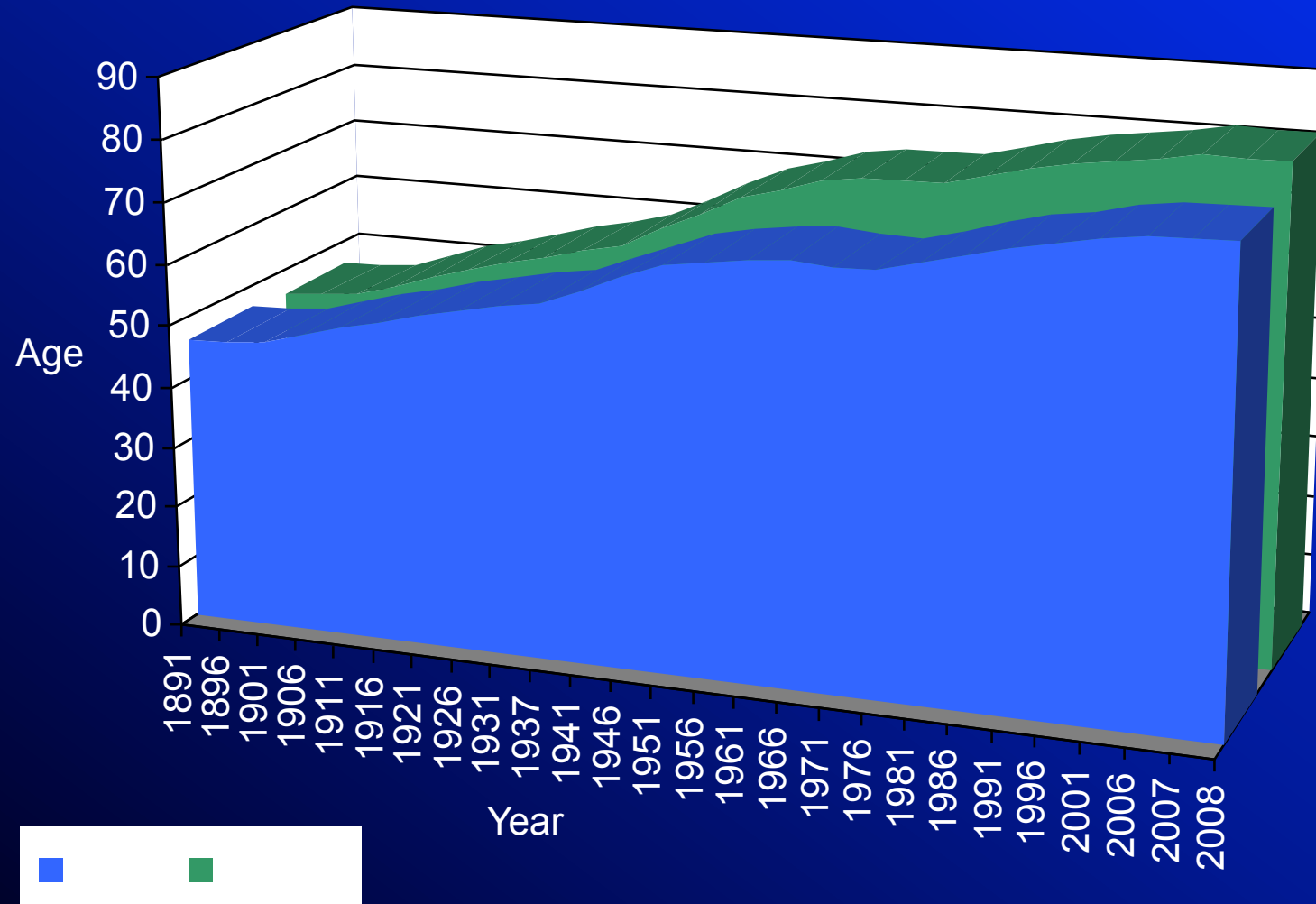
- Heart Disease deaths of the highest in Europe
- Sexually Transmitted Infections has increased by 24% since 2000
- One of highest teenage pregnancy rates
- 1/3 of children do 2 hours or less of physical activity a week
- 25% adult population literacy problems
- 19% adults depressed
- Male travellers lose 15 years of life
- 1/5 children live in poor households
- 18% of all deaths were excess winter deaths



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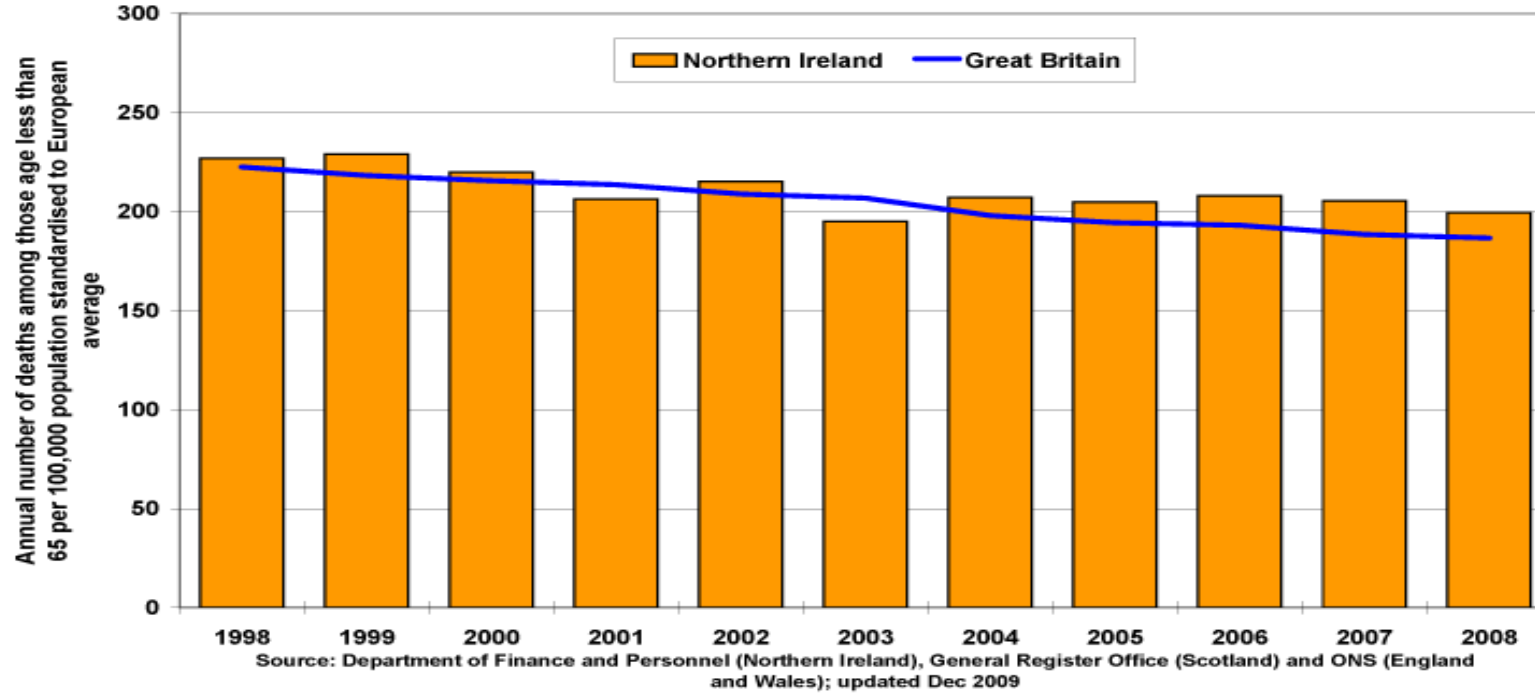
Life expectancy at birth in Northern Ireland



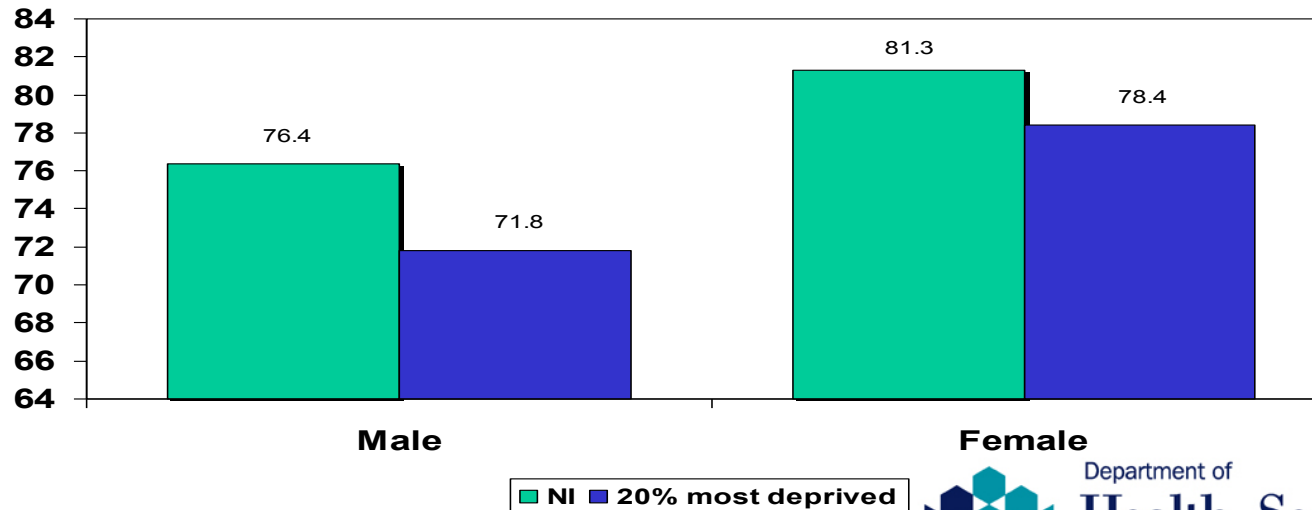
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The rate of premature death was declining up to 2003 but has not declined since then



Life expectancy (2006-08)
(Expected years of life from age 0)

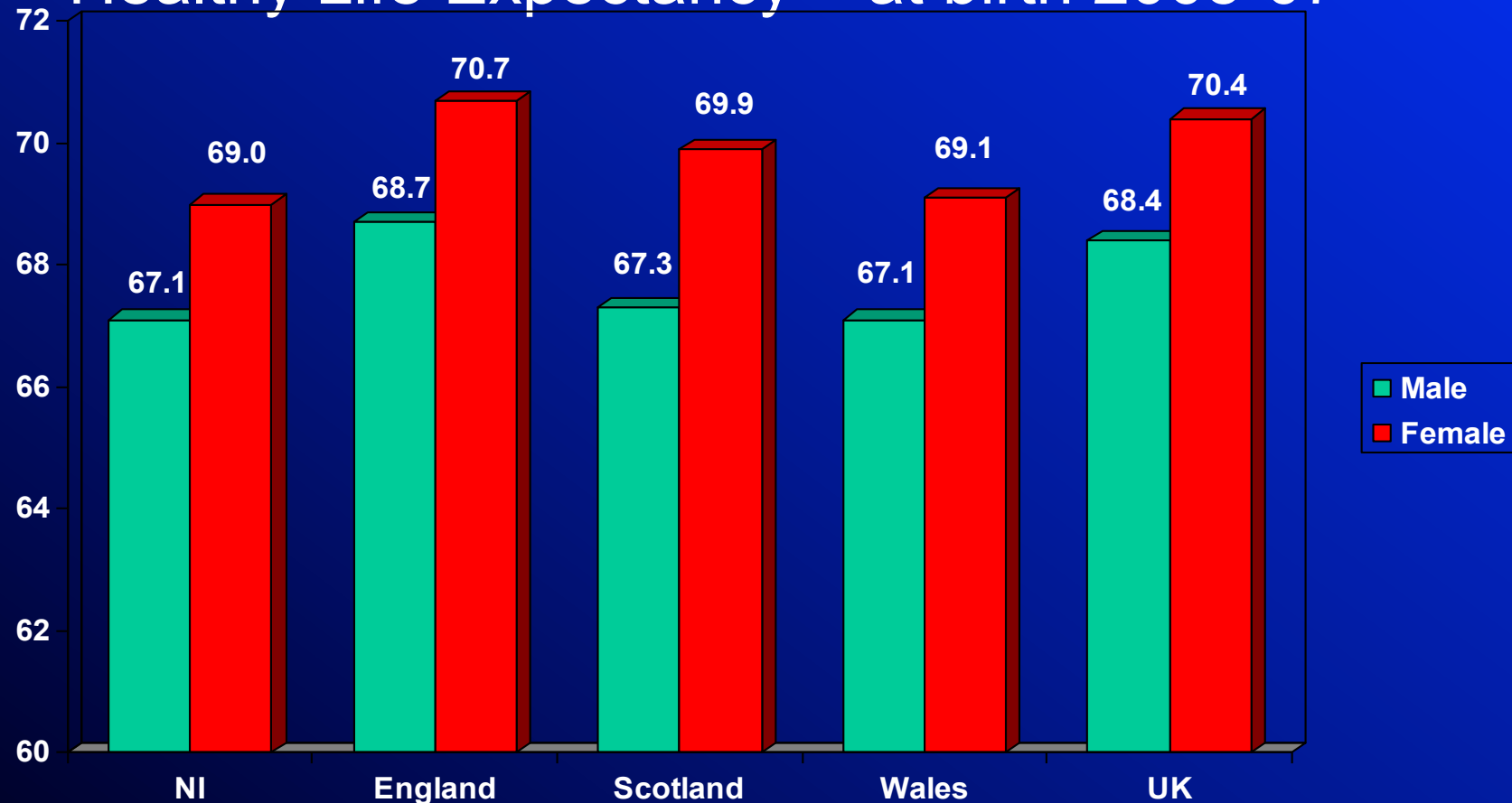


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Healthy life expectancy for females in NI is similar to Wales but lower than in England and Scotland, for males, it is similar to Scotland and Wales.

Healthy Life Expectancy – at birth 2005-07



Source: ONS

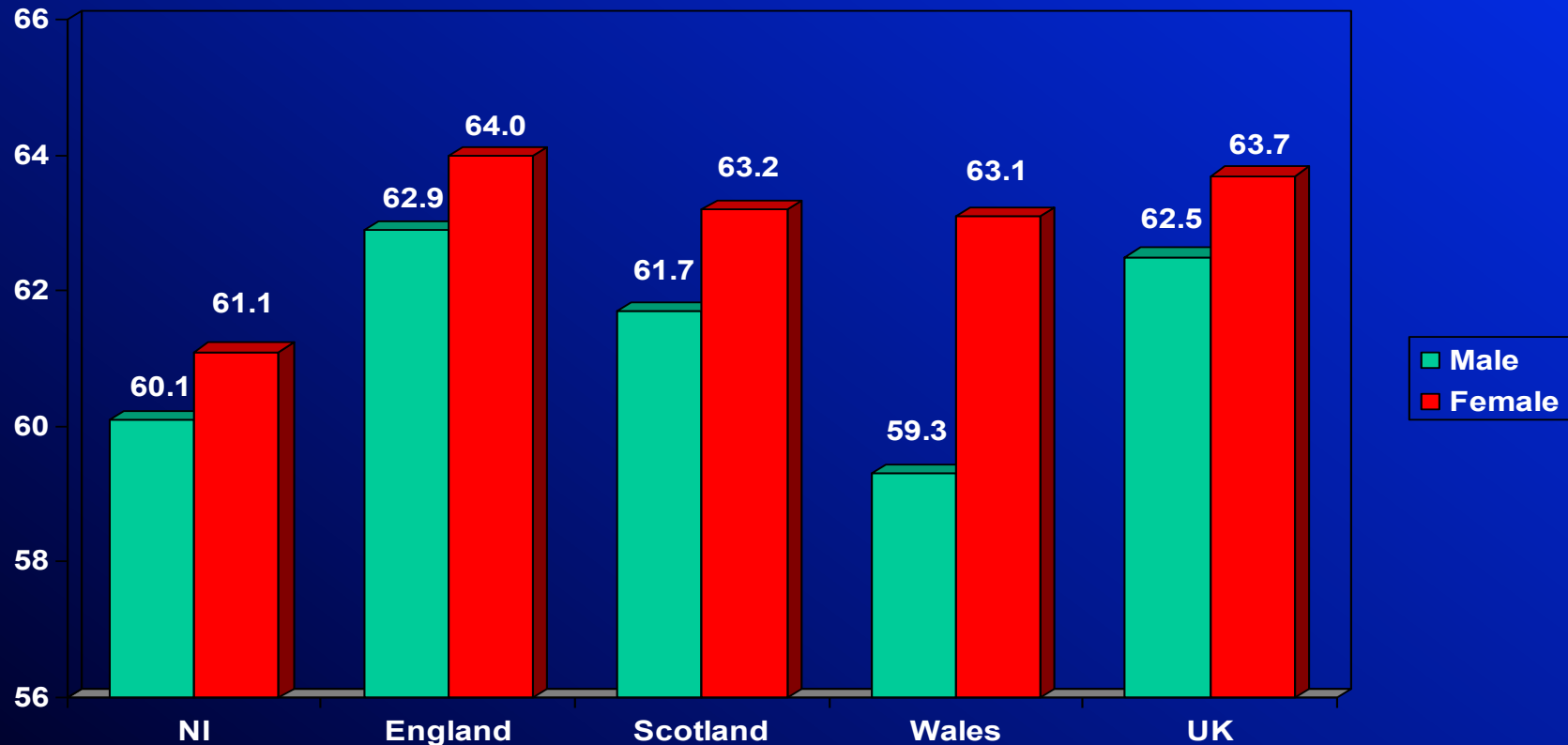


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Disability free life expectancy for females is lower in NI than in the rest of the UK, for males it is higher than in Wales only.

Disability free life Expectancy – at birth 2005-07



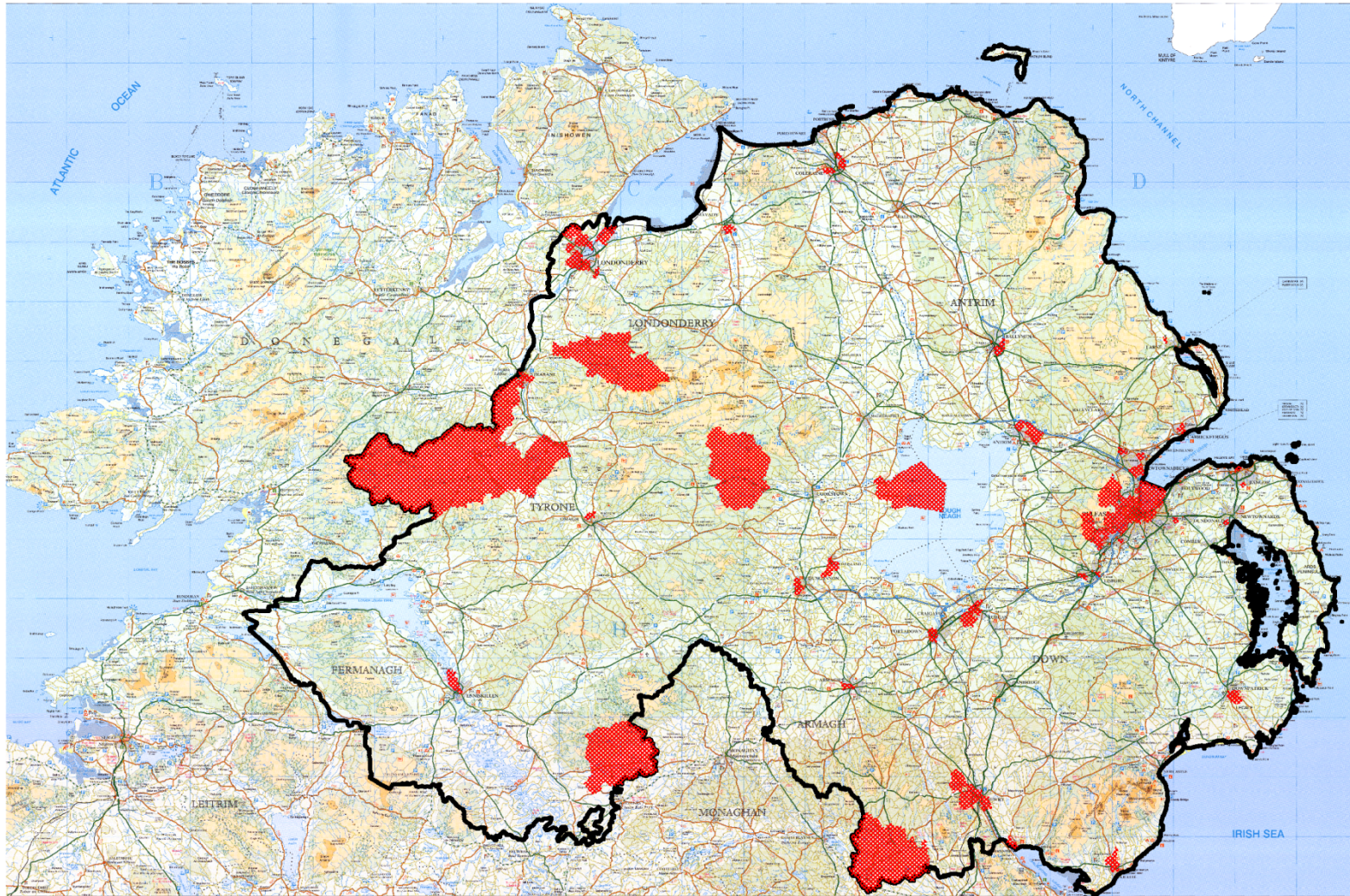
Source: ONS



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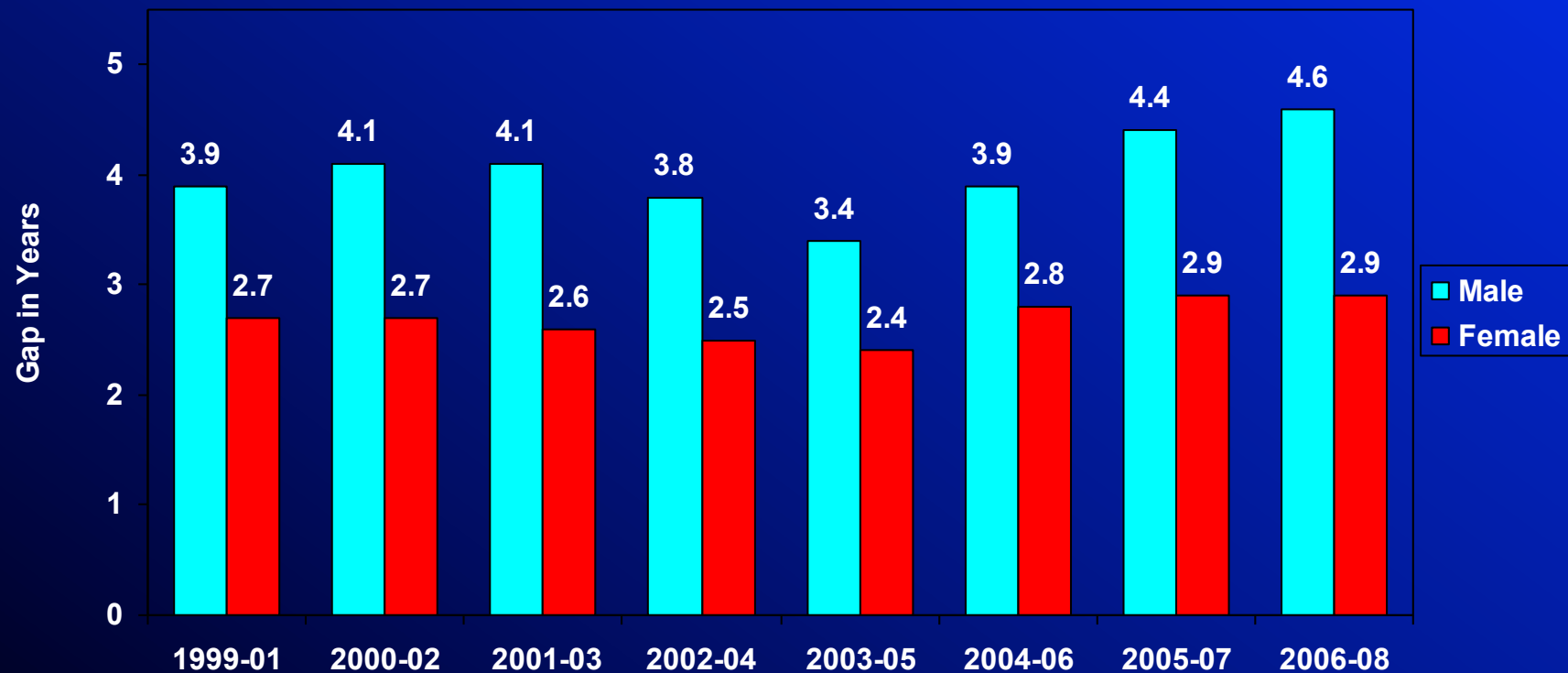
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20% most deprived areas in Northern Ireland



Life Expectancy

Gap between most deprived areas and NI overall

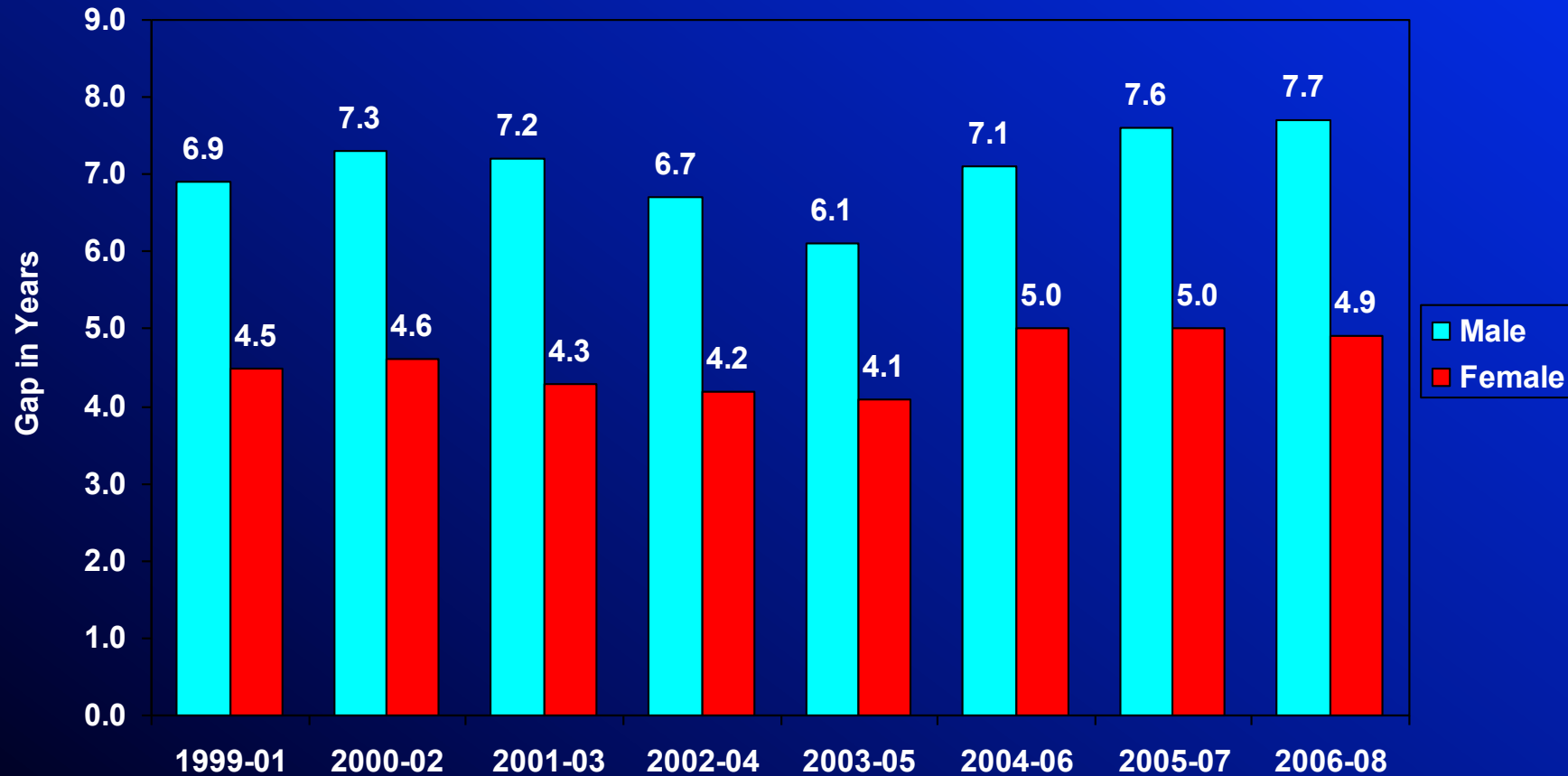


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Life Expectancy

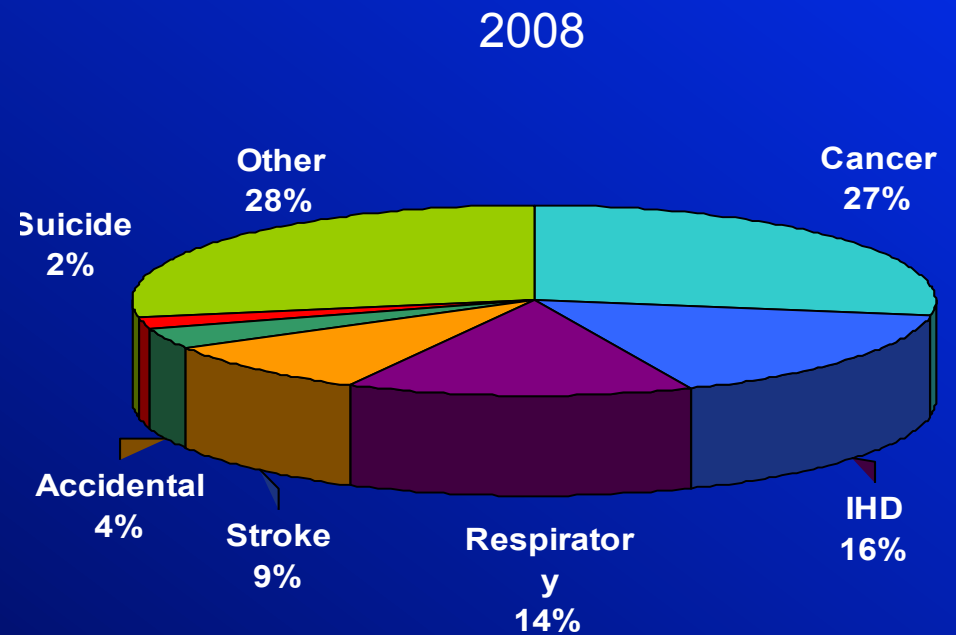
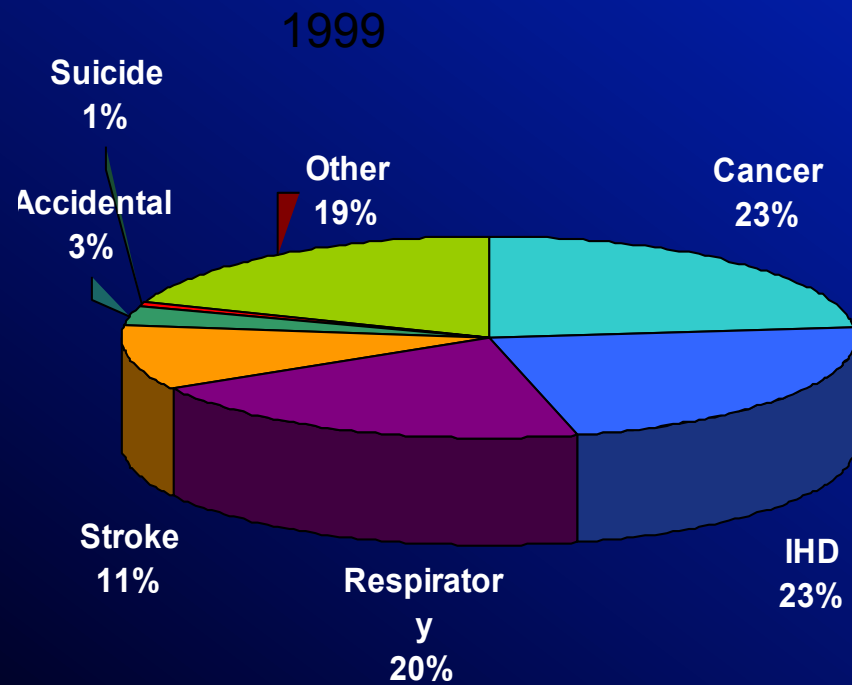
Gap between most deprived areas and least deprived areas



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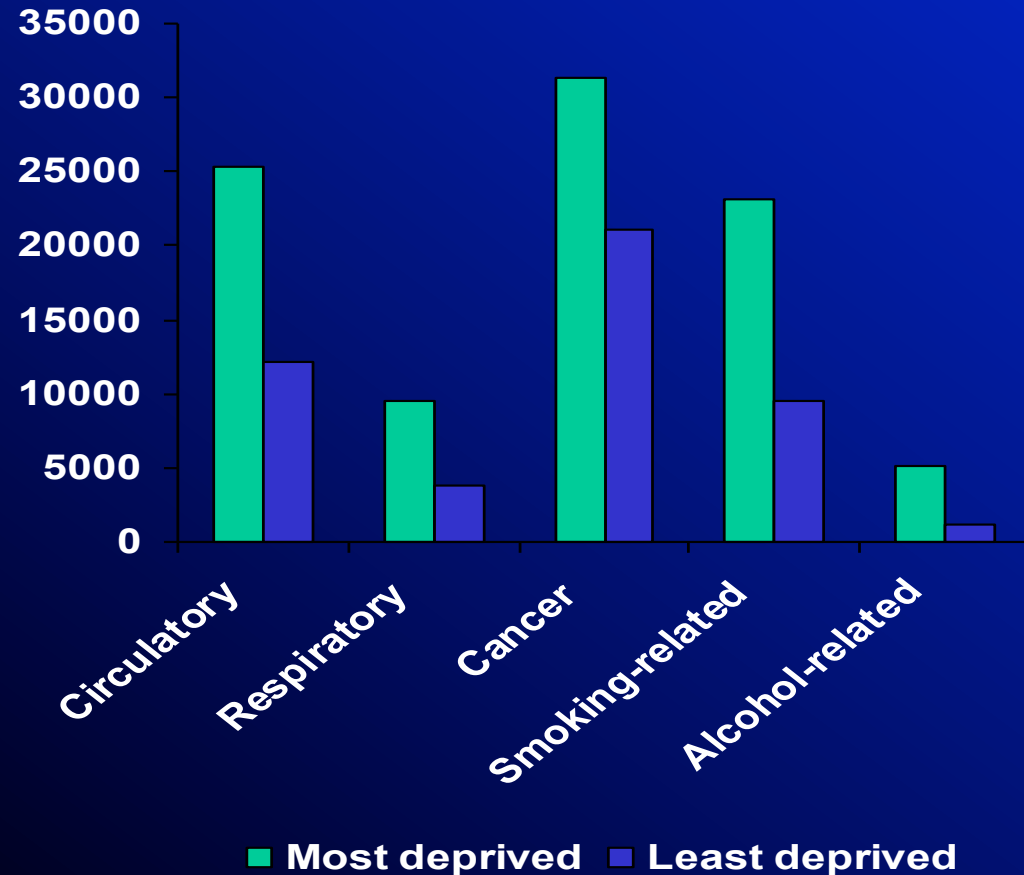
Major causes of death (all ages) Northern Ireland



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Potential years of Life Lost by Deprivation Status 2004-08



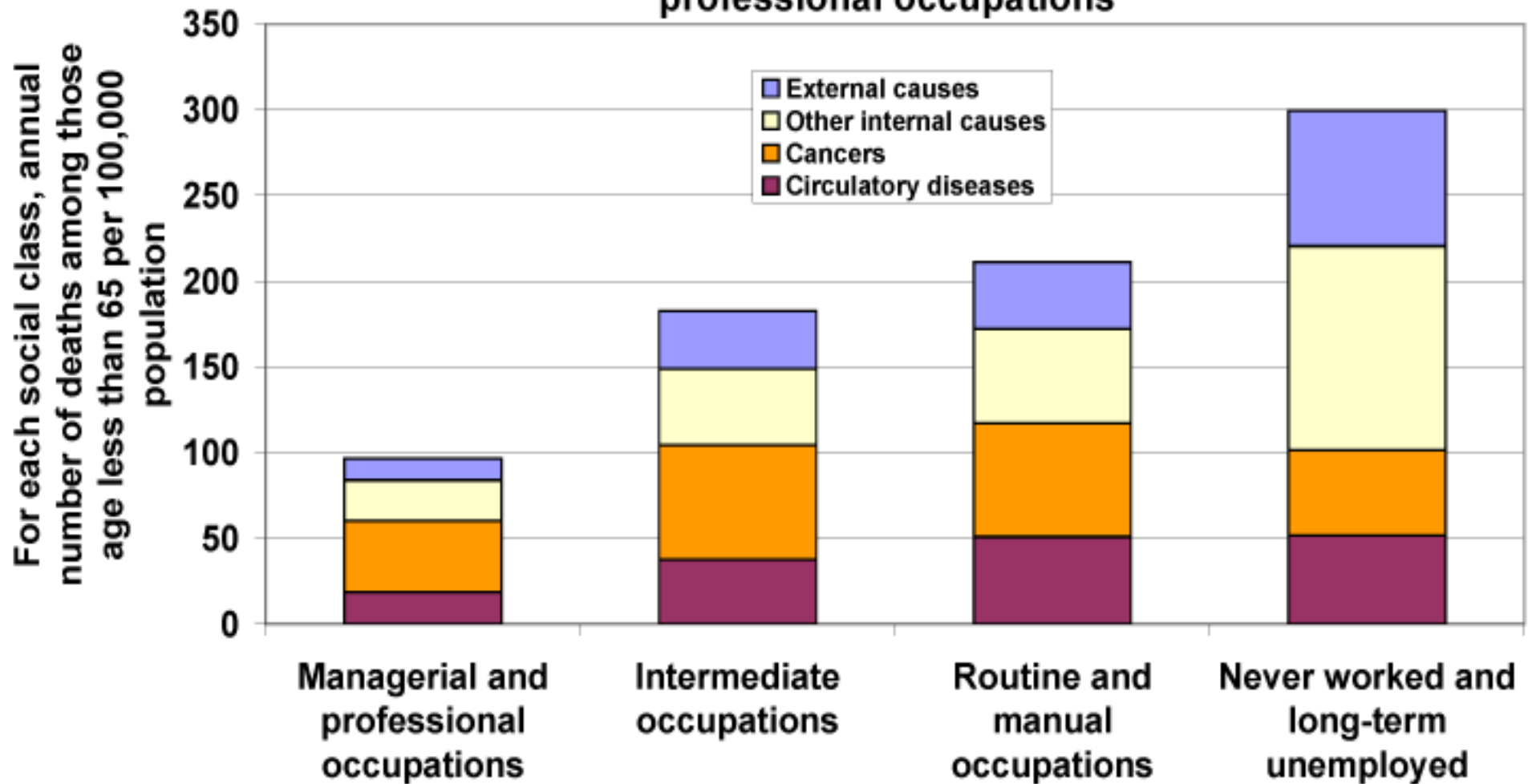
- Circulatory
- Respiratory
- Cancer
- Smoking-related
- Alcohol-related



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The rate of premature deaths among those in routine and manual occupations is more than twice that among those in managerial and professional occupations



Source: Department of Finance and Personnel Northern Ireland; the data is the average for 2004 to 2008; updated Dec 2009



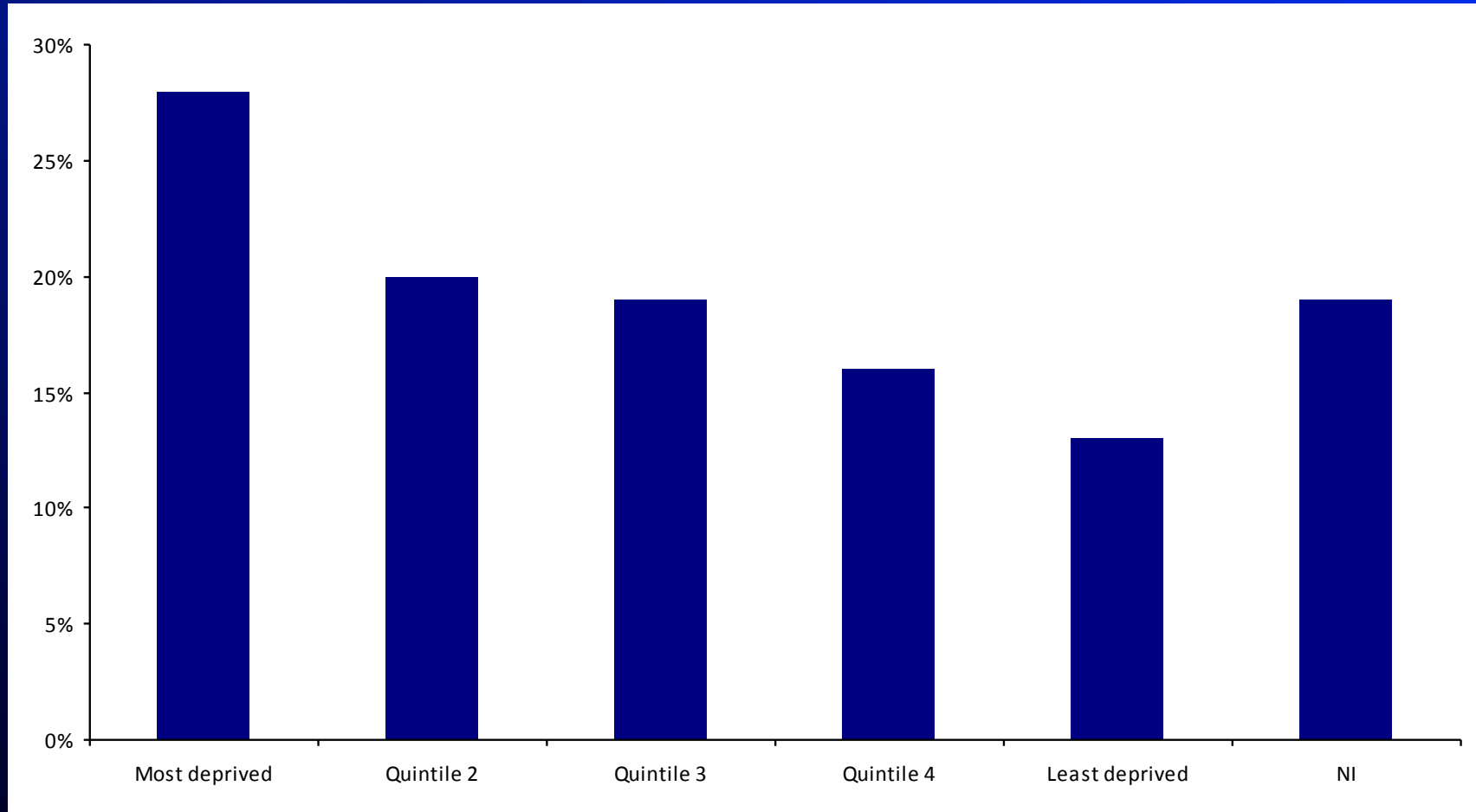
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Mental Health & Suicide

- 25% greater mental health needs than rest of GB
- Suicide rate per 100,000 pop in deprived areas twice that in non-deprived
- Unemployed people 2/3 times more at risk

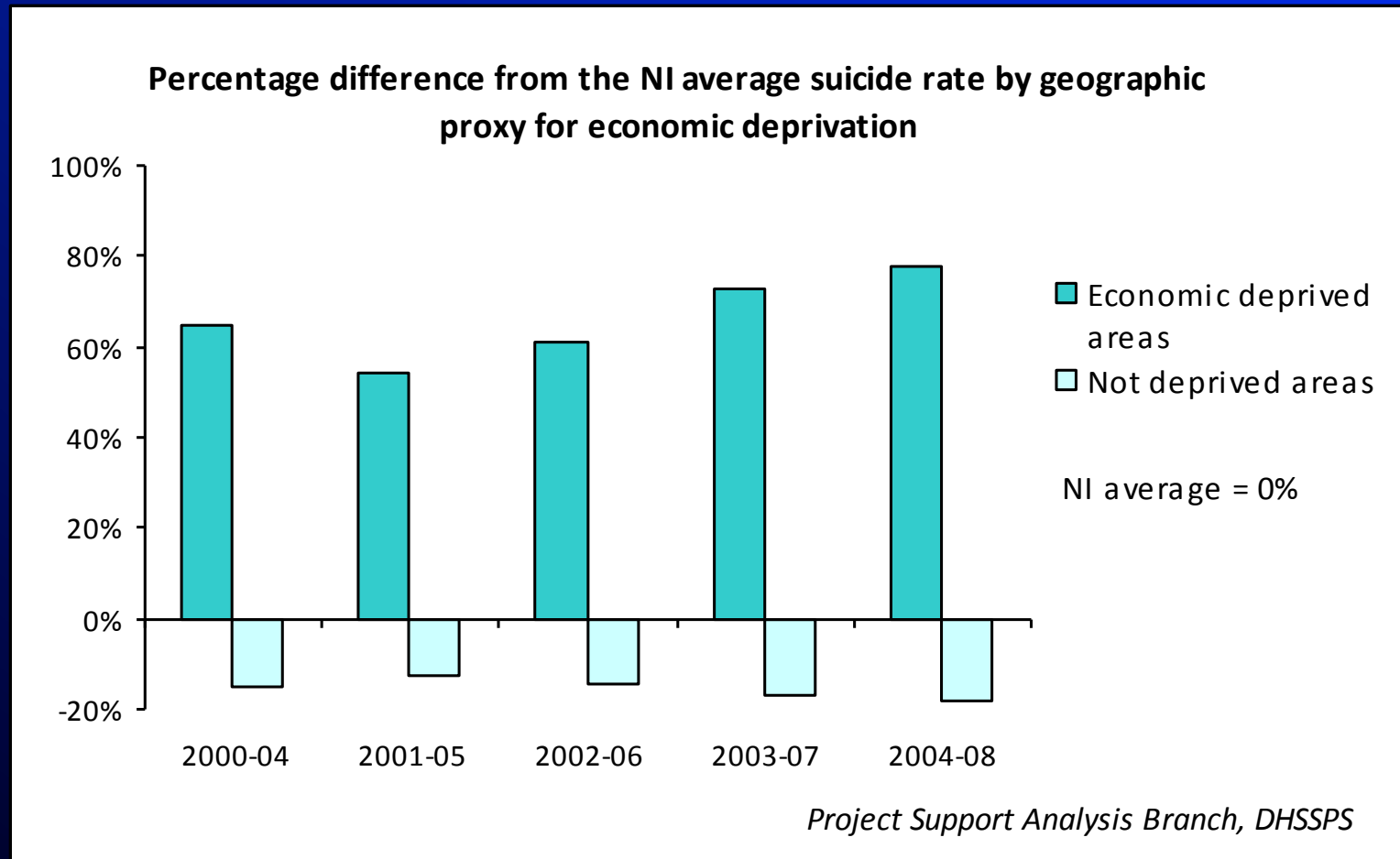
Mental Health Problems GHQ12 by deprivation quintile



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% Difference from NI average Suicide rate by deprived areas



Tobacco

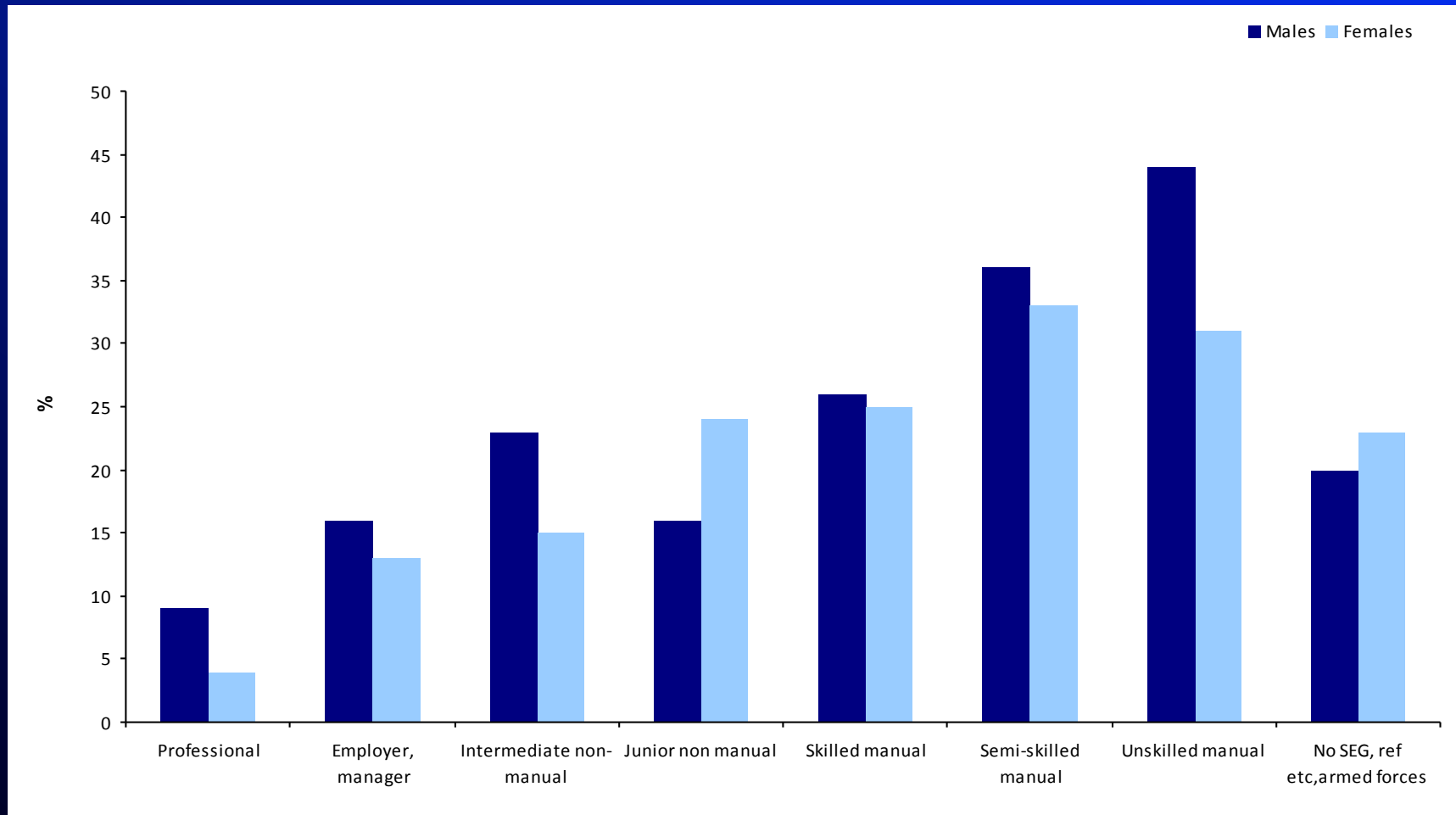
- Greatest single cause of preventable ill health and death
- Principle cause of the gap in life expectancy
- 24% of adults smoke – down from 33% in 1983, but manual groups still 31%



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% Smoking by Socioeconomic status



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Obesity

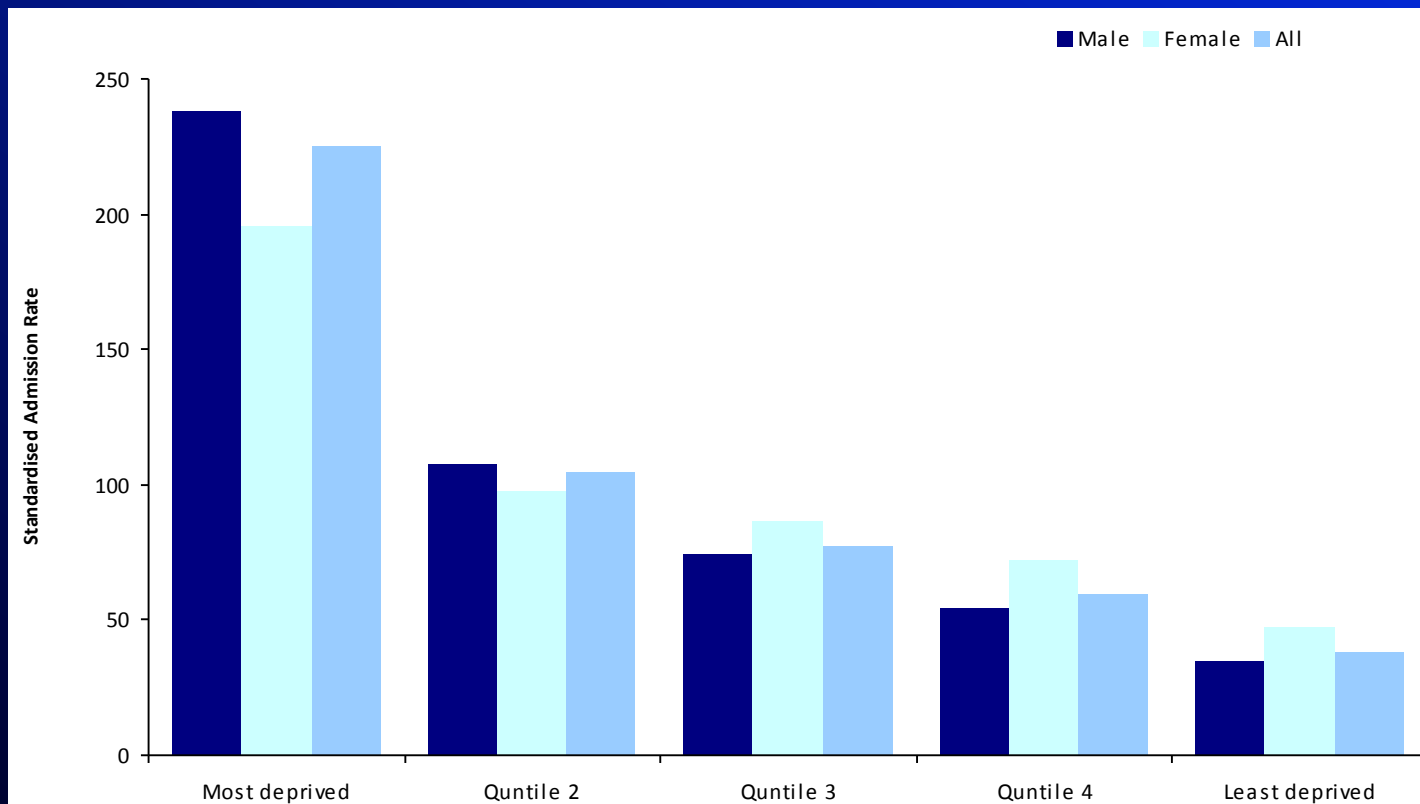
- 1 in 4 girls and 1 in 5 boys in P1 overweight or obese and 60% of all adults
- 450 deaths each year – reduces life expectancy by up to 9 years
- Increases risk of heart disease, cancer, Type 2 diabetes, impacts on well being esp young people
- Those living in most deprived areas more likely to be obese



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Alcohol related hospital admissions for working age 2006/07 – 2008/09



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Teenage Pregnancies / STIs

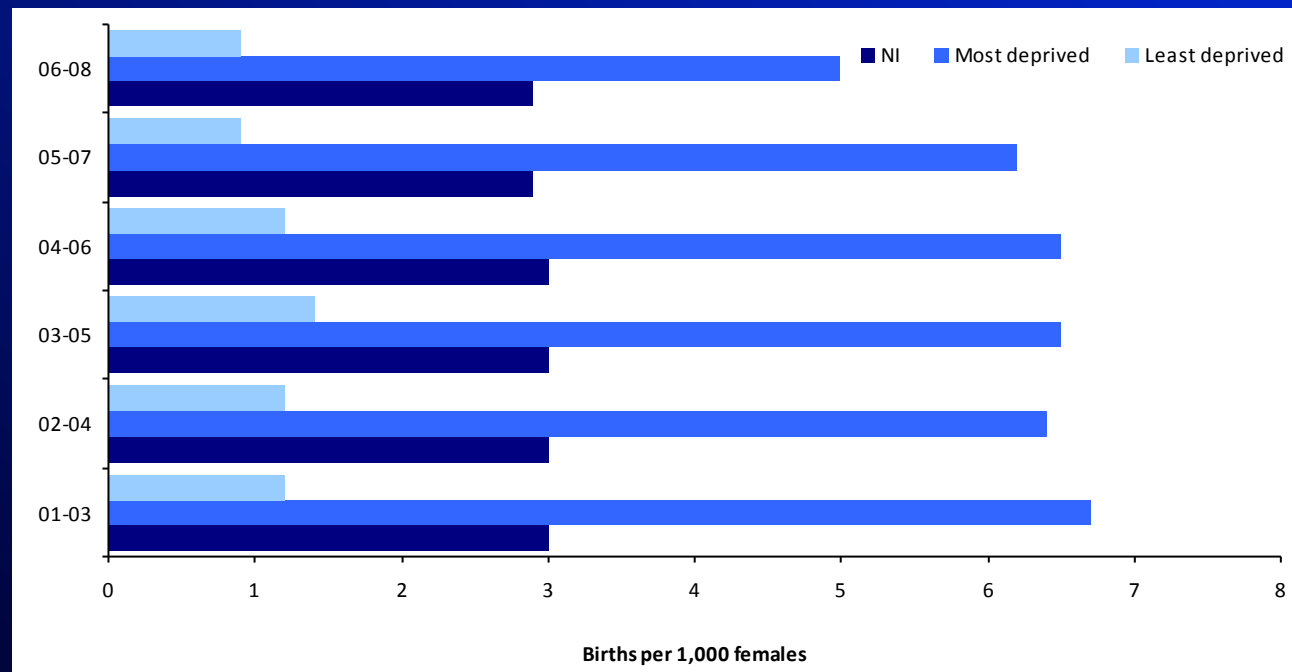
- Strong links between social deprivation and STI's, abortions and teenage pregnancies
- In 2008 1426 births to mothers aged under 20 years, of which 148 were to those under 17
- Teenage birth rate in deprived areas is double NI average rate



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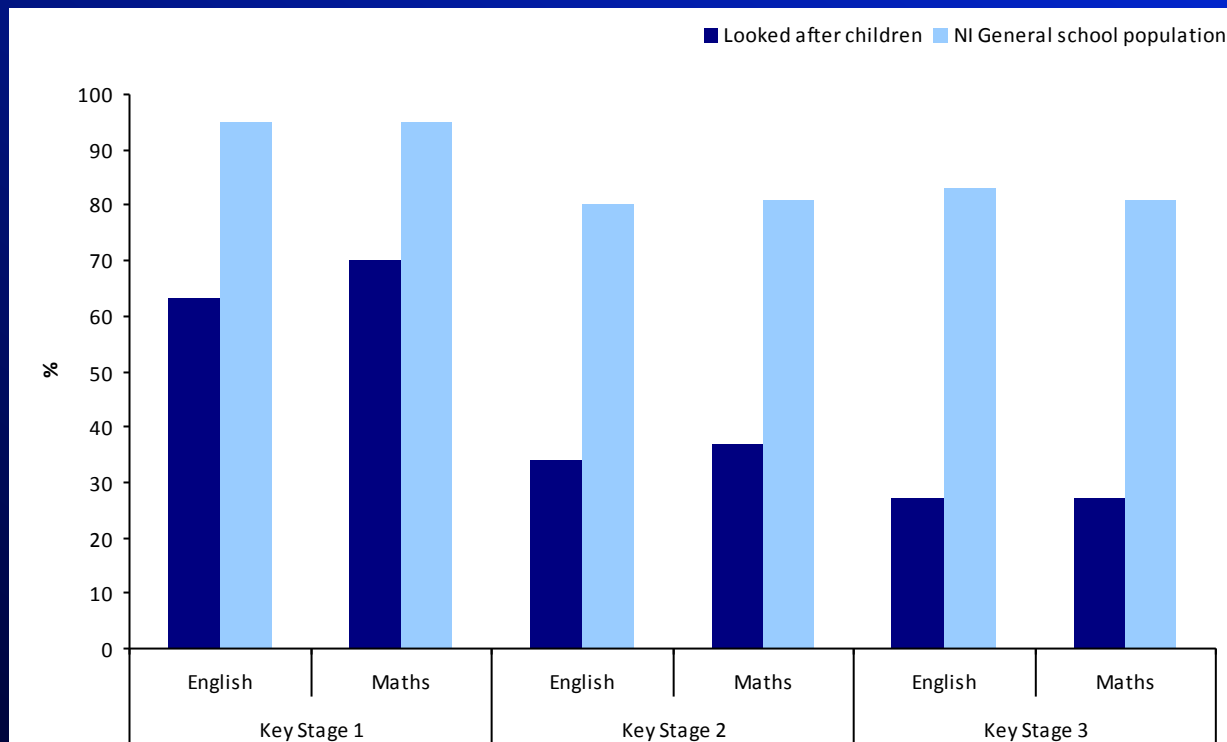
Teenage births (13-16) by deprivation status



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Children in care



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Travellers

- For male Travellers life expectancy at birth is 61.7 years – fifteen years less than that of the general population and now at the level of the ROI overall population on the later part of nineteen-forties.
- For female Travellers life expectancy at birth is 70.1 years – eleven years less than the general population and equivalent to that of women in the early nineteen-sixties.



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Health Inequalities

– access to health services

- Intervention rates of Coronary Artery Bypass Grafts (CABG) or angiography following heart attack were 30% lower in lowest socio-economic group (SEG) than the highest.
- Hip replacements 20% lower among lower SEGs despite 30% higher need.
- A one point move down a seven point deprivation scale resulted in GPs spending 3.4% less time per consultation



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Costs

- **Mental ill health – estimated economic costs for NI in 2008/09 are £3.8 billion**
- **Alcohol Misuse – social and health costs between £600 - £800 million p.a**
- **Smoking – hospital costs of treating smoking related disease approx £119 p.a**
- **Obesity – annual costs around £500m**



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Work, Health and the Economy

- Work benefits health - worklessness impacts negatively
- 31% of the working age population is not in paid work, higher than any GB region
- Unemployment is a significant contributor to social and health inequalities
- Cost of working age ill health in NI estimated at £2.9 - £3.6bn per year



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The Determinants of Health



Historical context

- Acheson
- Investing for Health
- WHO - Global commission on Social Determinants
- Marmot – Review of Health Inequalities, England
- Approach of coalition government – Nanny v Nudge?



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What have we been doing?

Strategies on –

- Investing for Health
- Mental Health & Suicide -
- Tobacco
- Obesity
- Alcohol & Drugs
- Teenage Pregnancies
- Healthy Future
- Families Matter



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Investing for Health – to improve health and reduce health inequalities

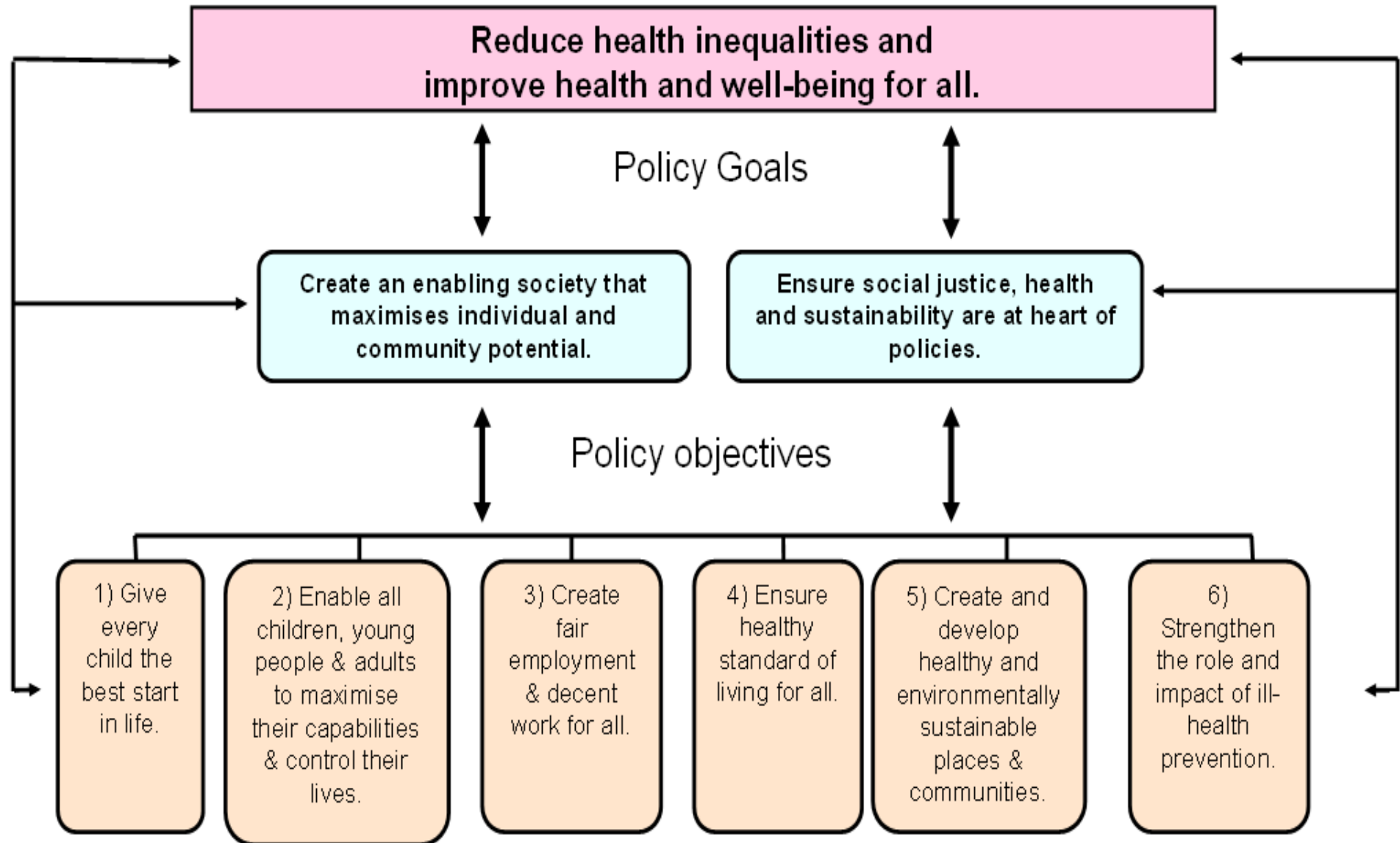
- Objectives on
 - poverty in families
 - education and skills to achieve full potential
 - mental and emotional well being at individual and community level
 - living and working environment
 - neighbourhoods and wider environment
 - accidents
 - enabling healthier choices
- Review concluded that ethos remains relevant - there will be a need to update around new evidence and context.



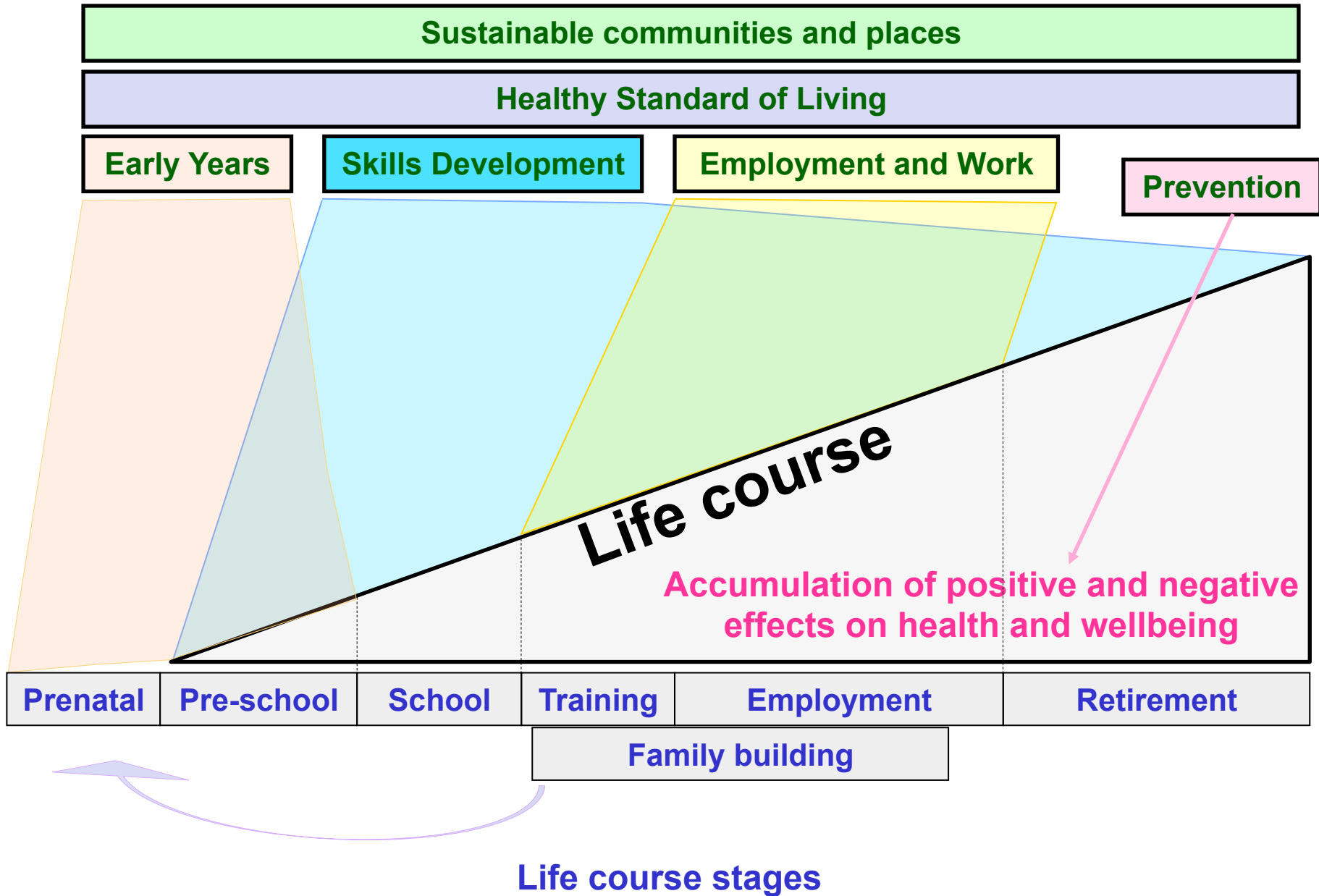
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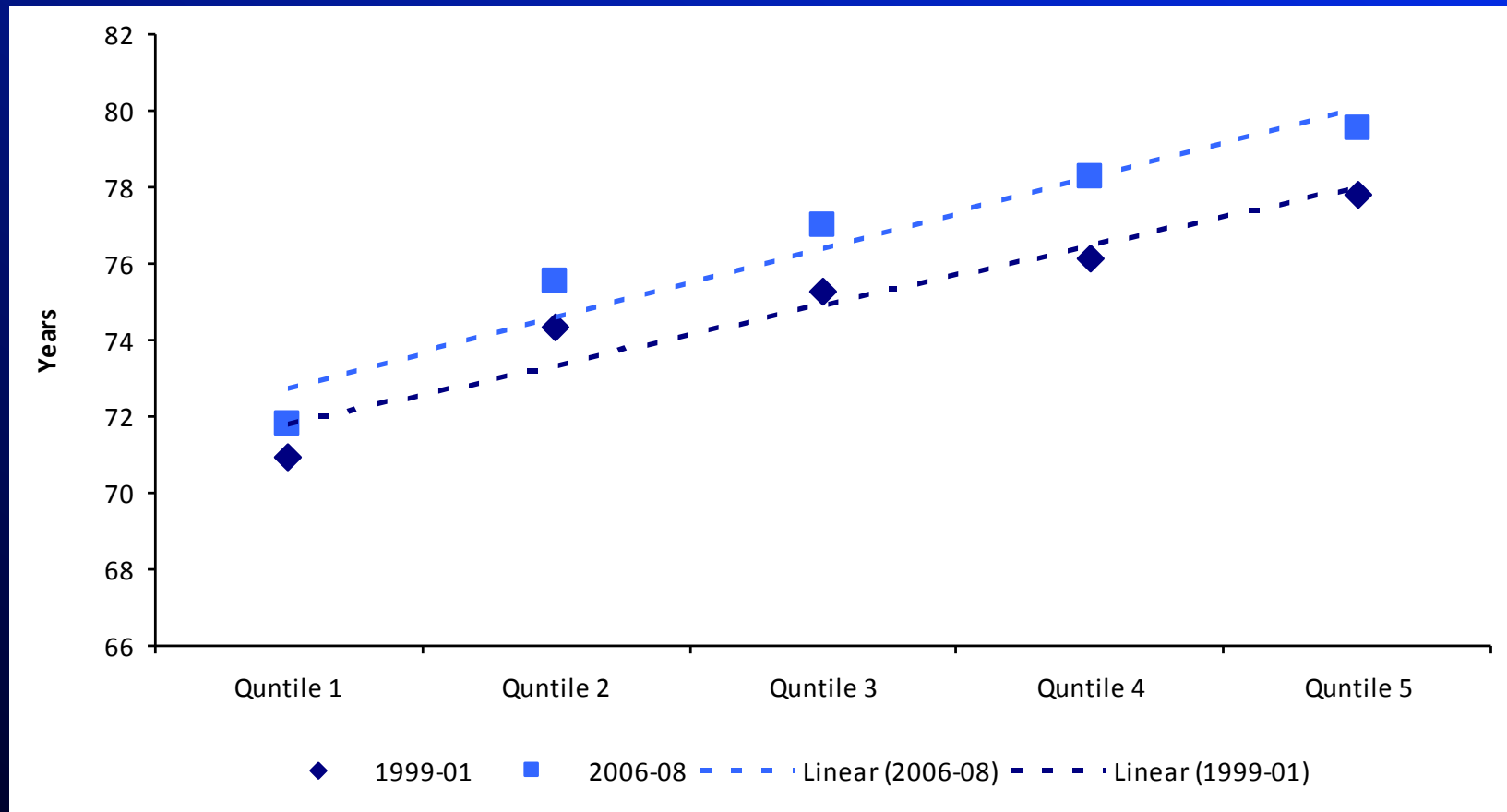
Marmot



Areas of action



Life Expectancy by social gradient over time - males



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Key challenges.....

- Current economic climate
- Local aspirations and regional vision
- Hard choices and competing priorities
- Expectations
- Ageing population



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.....More Challenges

- Health inequalities – and risk of widening (e.g. climate change)
- Balance between upstream and downstream
- Primary and Community Care
- Service redesign
- Shifting attitudes
- Maintaining the consensus
- Sustaining the momentum



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Barriers to change

- Medical v Social model
- Health beyond the remit of Health
- Administrative inflexibility eg resourcing
- Choice – favours the better off
- Need for efficiency
- Short termism v the long haul



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STRENGTHS AND POSSIBLE OPPORTUNITIES

- RPA / Health Sector reform – health inequalities at the centre
- PHA Role – strengthening capacity
- Local Government reform
- Programme for Government/Spending Review
- Different concepts – Nudging v Nannying, Big Society
- Good level of engagement in NI



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Public Health Research

- Establishment of UKCRC Public Health Research Centre of Excellence in Northern Ireland
- Opportunities for high quality research by experts working in partnership with practitioners, policy makers and wider stakeholders to tackle public health issues



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Dr J McKenna, CMO (1992)

“When data about the number of beds or of operations or of prescriptions written ... are confined to dusty, unopened files ... history will ask rather what successes were recorded in this decade in eliminating the inequalities, in reducing the morbidity and in improving the health of the population of Northern Ireland.”



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