

MAKING SENSE  
OF HEALTH  
INEQUALITIES

Health inequalities are avoidable differences in health outcomes and experiences between groups and populations. These differences affect length of life, quality of life, and access to care.

The conditions in which we are born, grow, live, work and age, and their often-interlinked nature impacts our overall health outcomes. These are the wider determinants of health.

The overarching vision for the NHS is to provide universal, equitable healthcare across all groups and characteristics. Despite world-leading treatment and care, inequity in both experience and outcomes between population groups has persisted in the health service.



## State of the nation

### Life expectancy and quality of life

A gap in life expectancy between eight years for women and nine years for men exists between the top 10% and poorest 10% of the population, often seen within one city or region. People in the least deprived areas are expected to live nearly 20 years longer in good health than the most deprived.



### Mental health

Mental health admissions are twice as high in the most deprived quintile of the population compared to the least. Black or black British patient groups are over five times more likely to be detained under the Mental Health Act.



### Obesity

The highest rates of adult obesity are seen in the most deprived areas. Children living in these areas of England are nearly twice as likely to be obese, and severe obesity in children is around four times higher.



### Long-term health conditions

People in lower socio-economic groups are more likely to have more severe, long-term health conditions. On average, patients in the most deprived areas develop multiple long-term conditions 10-15 years earlier than the those in the most affluent areas.



### Access to health services

More deprived areas tend to have higher health needs yet have access to fewer GPs per person, less engagement with secondary care, and less access to preventative interventions and social services. The most deprived groups also report poorer experience and satisfaction of health services.



### Maternal health

Women living in the most deprived areas had a maternal mortality rate over two times higher than the least deprived. Black women are five times more likely to die in pregnancy, childbirth and postpartum than white women.

## The role of NHS trusts in addressing health inequalities

Through dedicated focus on health inequalities, trusts can work to address disparities in access to healthcare, resources, and opportunities that disproportionately affect socio-economically deprived and ethnic minority communities. Tackling disparities not only promotes social justice but improves population health outcomes.

### Cultural change

Embed a cultural shift by prioritising equity and inclusivity across service delivery. Ensure a clear agenda and strategic leadership to tackle inequalities at all levels of the workforce.



### Engagement with communities

Engage with patients and communities to co-design and co-produce services and interventions that meet specific needs.



### Data

Invest in strong data collection and analysis to understand patient populations, gain insights to underlying factors of inequalities, and tailor effective interventions.



### Integration

Integrate services and interventions with different sectors and system partners to improve understanding, collaboration and access to services for patients.



### Anchor institutions

Recognise responsibilities as anchor institutions and work proactively to tackle inequalities within the healthcare workforce and patient communities.

## Our support offer

As part of our commitment to embedding a focus on health inequalities and race equality as a pillar of effective and sustainable healthcare, we have developed a support offer for trust boards on health inequalities aimed at supporting trusts' work to reduce health inequalities in their services and across the wider system. This work, alongside our race equality programme, will support trusts to make sense of health inequalities and how they can begin to embed a focus on narrowing the health inequalities gap as part of their 'core business'.

Informed by research and engagement with trust leaders, the programme's events and resources focus on:

- supporting trust leaders to understand health inequalities and move from analysis to action
- providing a forum for trust leaders to network, share best practice and discuss opportunities
- offering digestible insights and facilitate reflective conversations at board level.

NHS trusts play a crucial role in addressing health inequalities, by delivering inclusive services for all.

Our resources at [nhsproviders.org/development-offer/health-inequalities/resources](https://nhsproviders.org/development-offer/health-inequalities/resources) make the case for why and how trust leaders can take action.

For more information about our Health Inequalities programme and for a full list of references for this document, please email [health.inequalities@nhsproviders.org](mailto:health.inequalities@nhsproviders.org)

Visit [nhsproviders.org/development-offer/health-inequalities](https://nhsproviders.org/development-offer/health-inequalities) or scan the QR code for more information.

