

# Addressing Healthcare Inequalities

## A national perspective

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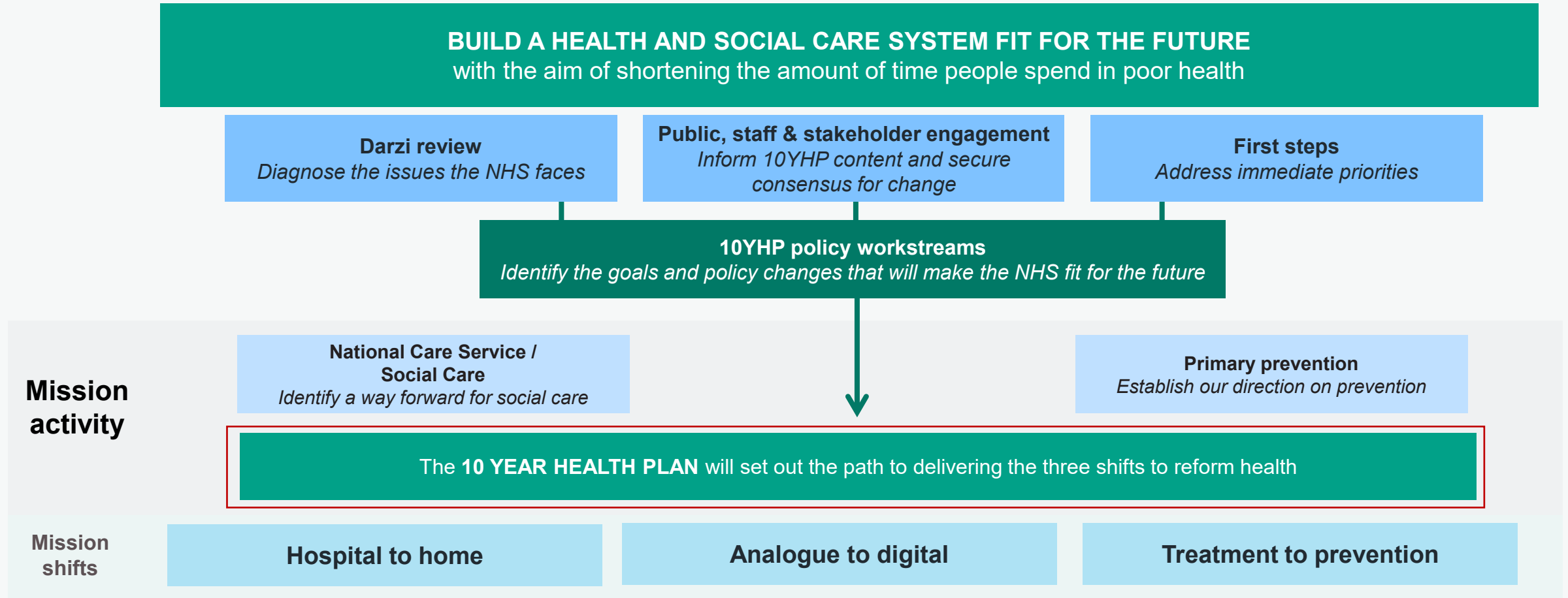
**National Healthcare Inequalities Improvement Programme**  
NHS England

*“Exceptional quality healthcare for all, through equitable access, excellent experience and optimal outcomes*”

# The year is 2025 .....

- **Smoking** is the leading cause of health inequalities and **accounts for half of the difference in life expectancy** between the most and least affluent communities in England.  
Source: [Public Health Profile](#)
- **People in the most deprived areas are twice as likely to die prematurely from cardiovascular disease** than people in the least deprived areas.  
Source: [Office for Health Improvement and Disparities 2024](#)
- For **diabetes**, people living in the most deprived areas are more likely to develop heart diseases such as heart failure or angina and kidney-related complications, leading to higher rates of dialysis or kidney.  
Source: [Tackling Inequalities in Diabetes](#)
- People living in the most deprived parts of England are **more than twice** as likely to wait over a year for **elective care** than people living in the most affluent areas.  
Source: [Robertson et al 2023](#).
- **Women experiencing homelessness** are **less likely** to attend **breast screening appointments** than the general population.  
Source: [Office for Health Improvement and Disparities 2024](#).

# The 10 Year Health Plan (10YHP) is part of the government's health mission to build a health service fit for the future



# ***“I am treated in a fair and inclusive way, irrespective of who I am”***

## **Co-Chairs**



**Bola Owolabi** – GP and Director for the National Healthcare Inequalities Programme, *NHS England*



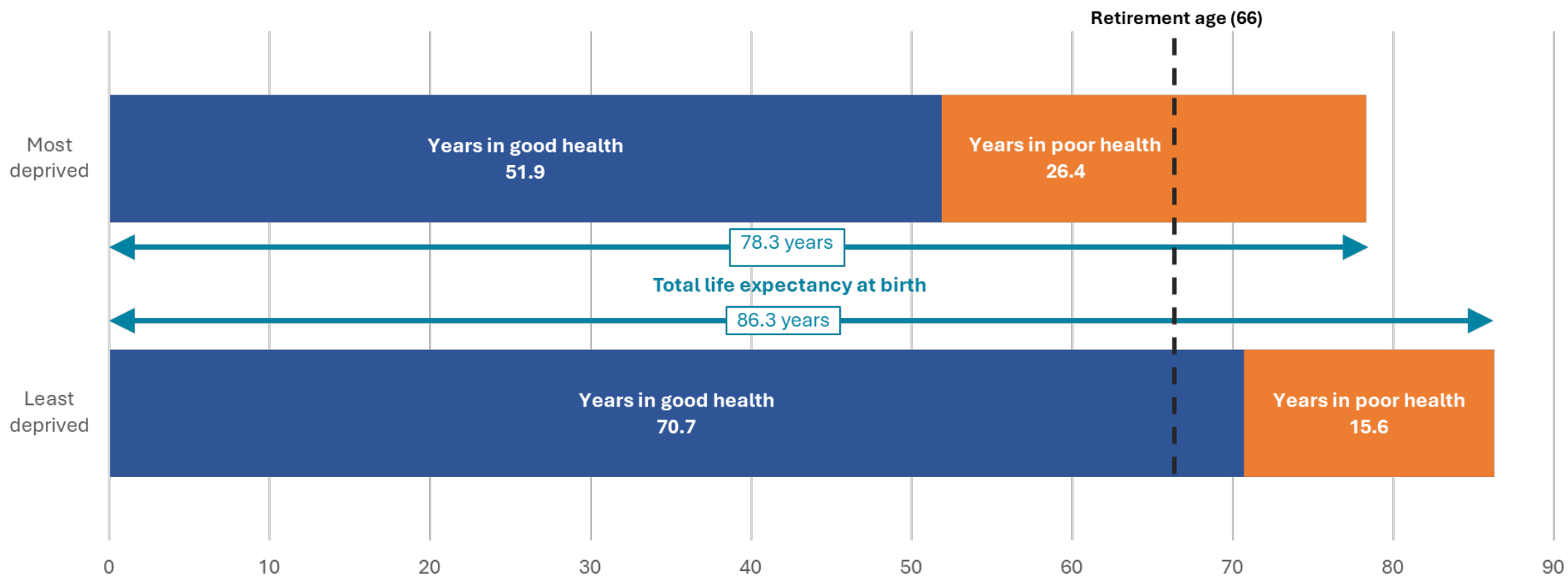
**Jacob Lant** – Chief Executive, *National Voices*

## ***Key themes from the Working Group***

- Increasing our focus on the **most deprived areas and communities** where we know health inequalities are greatest
- Involving organisations from a **wide range of communities** to better meet patient needs.
- **Mitigating digital exclusion**, ensuring services are accessible to all
- An NHS that is **inquisitive** about those it is caring for
- **Trust is key** in tackling health inequalities
- A **shift in power** to patients and communities

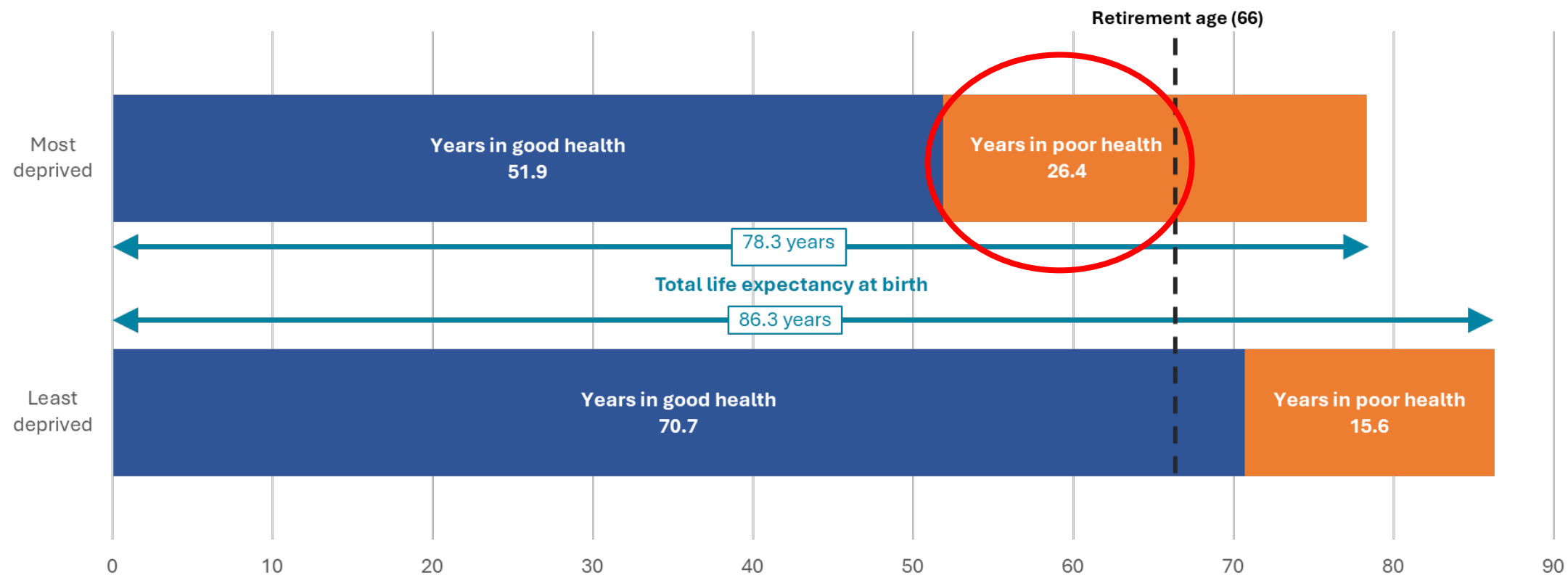
# There are inequalities in how long we live and in the proportion of our lives spent in poorer health

Years of life expectancy at birth, female, England, 2018-20<sup>1</sup>

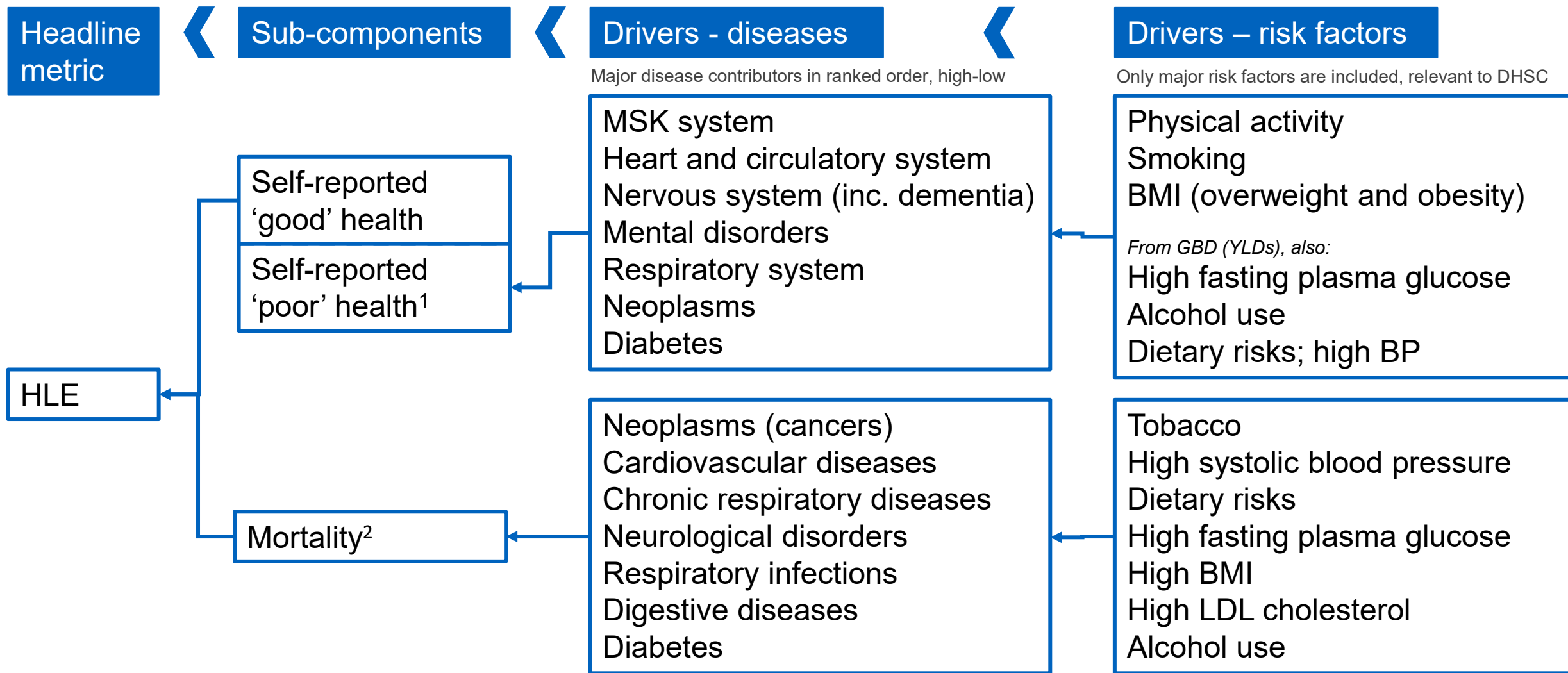


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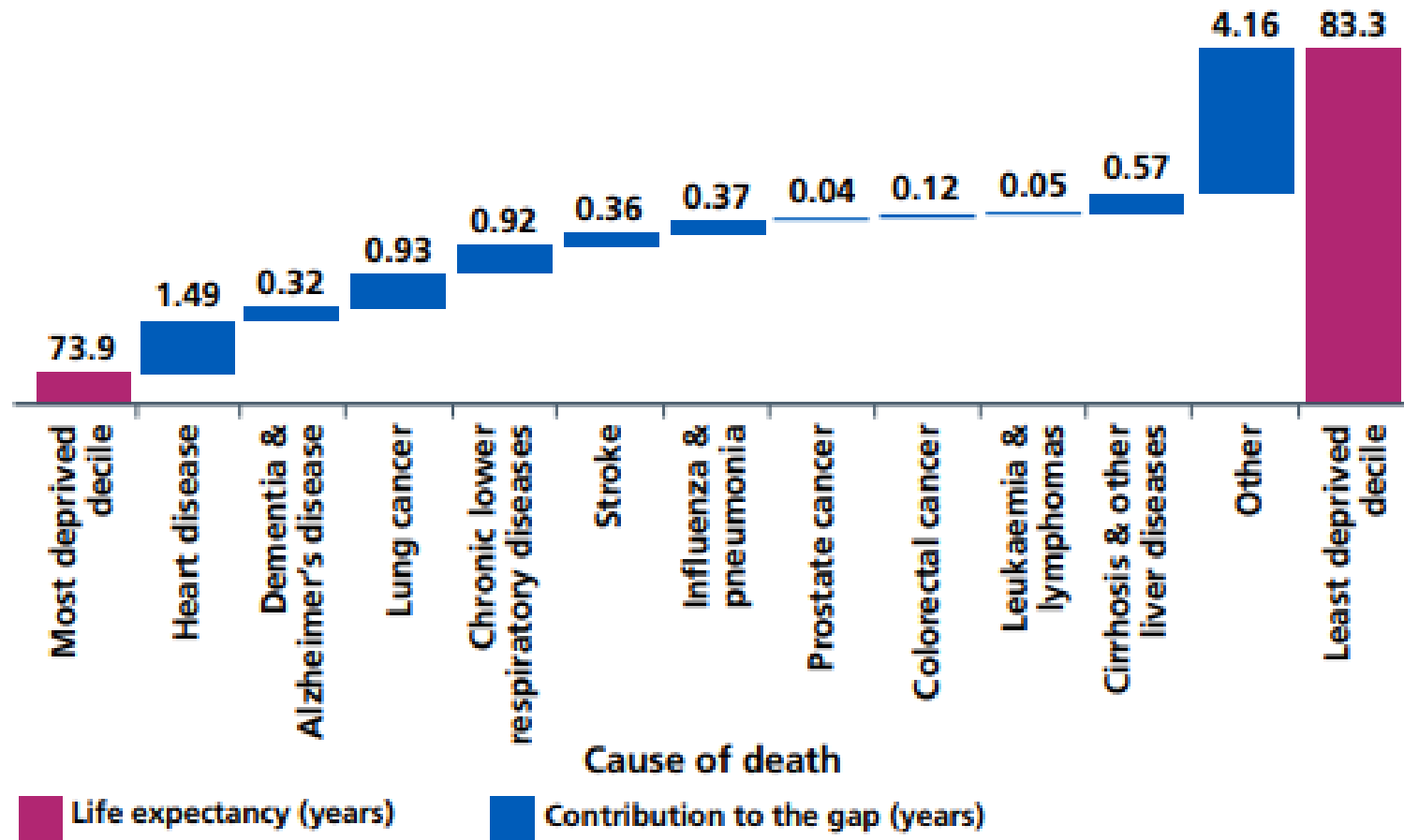
# Disease and risk factor drivers of Healthy Life Expectancy



<sup>1</sup>[Understanding the drivers of healthy life expectancy: report - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/672222/Understanding_the_drivers_of_healthy_life_expectancy_report.pdf)

<sup>2</sup>[GBD \(healthdata.org\)](https://www.healthdata.org/gbd)

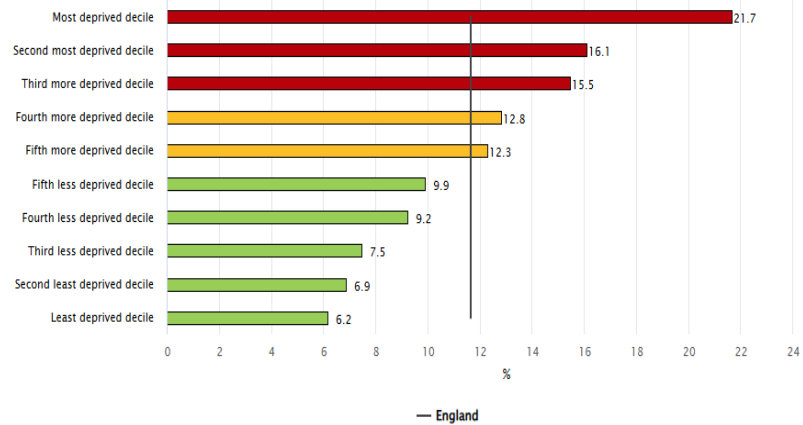
# The deprivation gap for life expectancy is being driven by preventable and manageable diseases



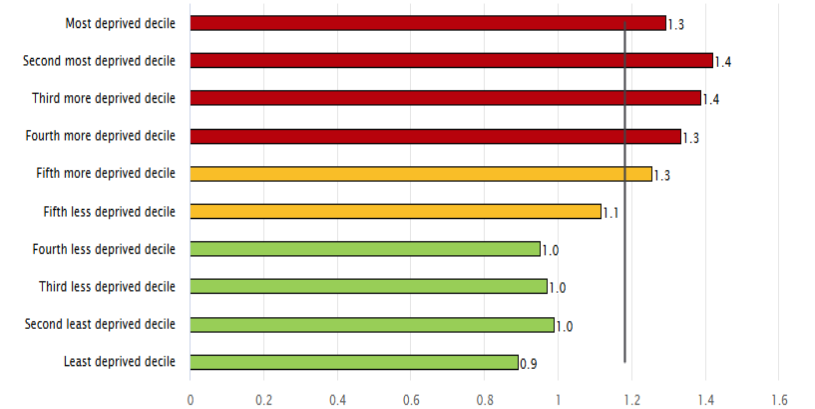
Source: OHID, 2022



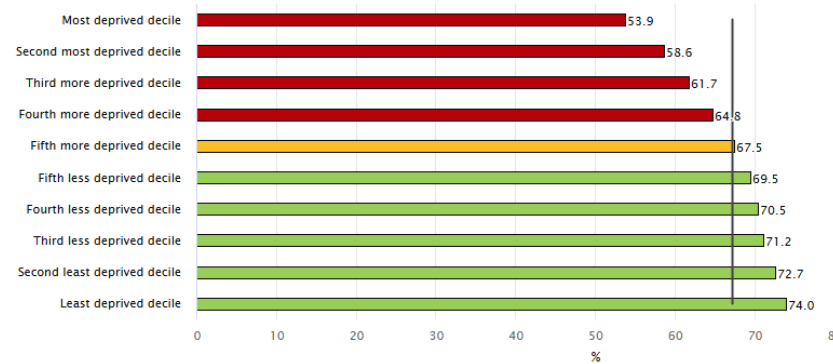
# Major risk factors for poor health generally correlate with deprivation



Smoking



Obesity



Physical Activity

Prevalence rates in adults by deprivation decile in England in 2023/4

Source: OHID; Public Health Profiles: Child and maternal health data

# What works: high impact interventions from international literature to promote prevention and address inequalities

## Addressing Individual Barriers to Equity and Prevention

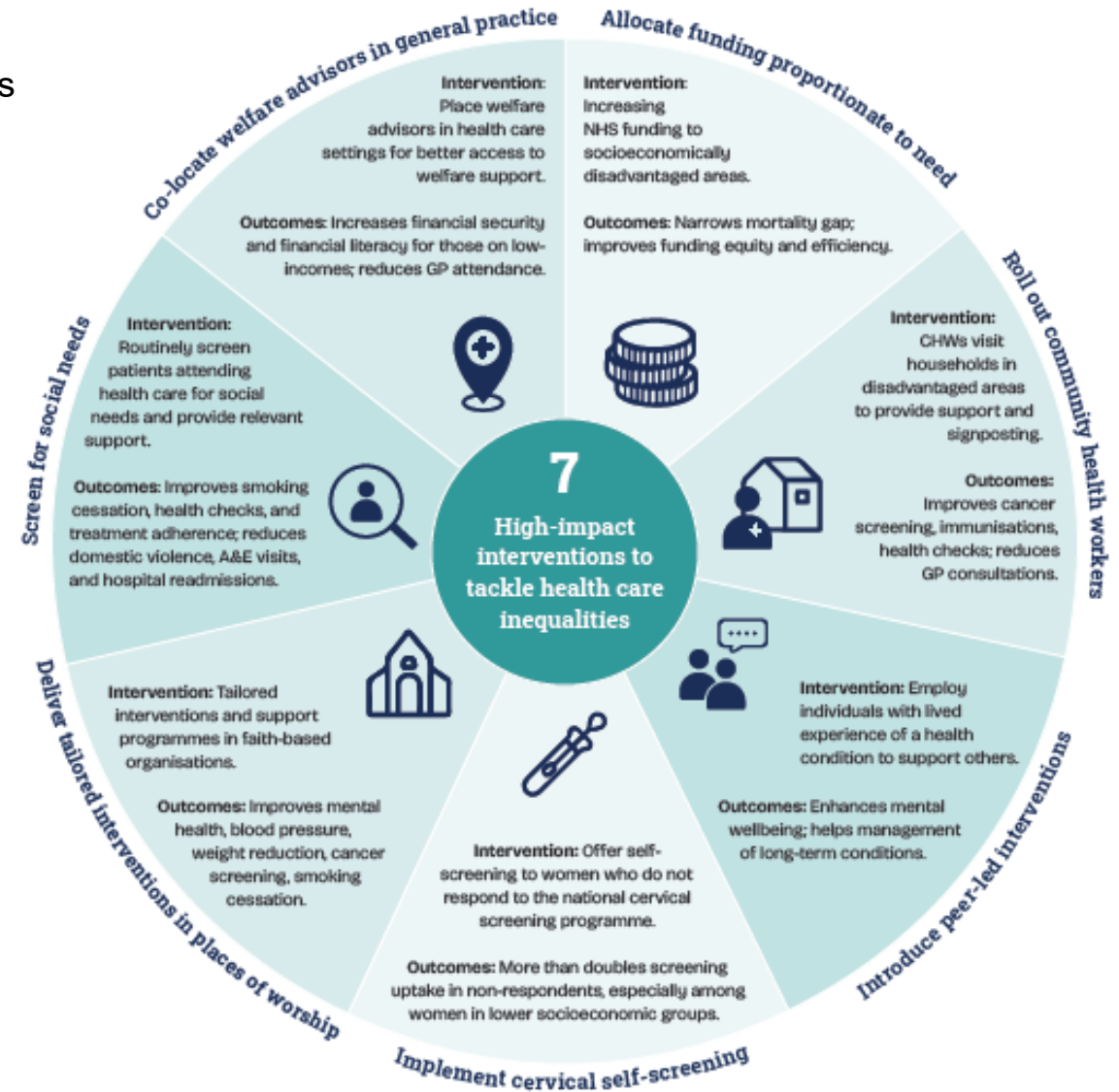
1. **Case finding** of long-term health problems in disadvantaged communities
2. Optimising **behavioural interventions** in the NHS to support disadvantaged groups
3. Designing health care **inclusively** for people with low incomes
4. Improving **health and digital literacy** in disadvantaged groups

## Financing for Equity and Prevention

5. **Funding** models to address health care inequalities
6. Payment mechanisms to improve **prevention spending** in health care settings

## Empowering Communities and Organisations

7. Community engagement and empowerment to address health care inequalities
8. Using the power of **anchor institutions** to support prevention and inequalities
9. Leveraging Quality Improvement to address health care inequalities
10. Empowering health care staff to address health care inequalities





## Getting people connected through the National Databank

There's now over 2,500 Digital Inclusion Hubs offering the National Databank.	Over 125,000 data packages have been given to people.	95% of Databank recipients feel more digitally able and/or safe.	98% of Databank recipients feel happier, healthier and/or better off.
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#### Cheshire & Merseyside

##### Navigating our toolkit and approach

Please use the interactive menu at the bottom of each page to explore our toolkit and approach.

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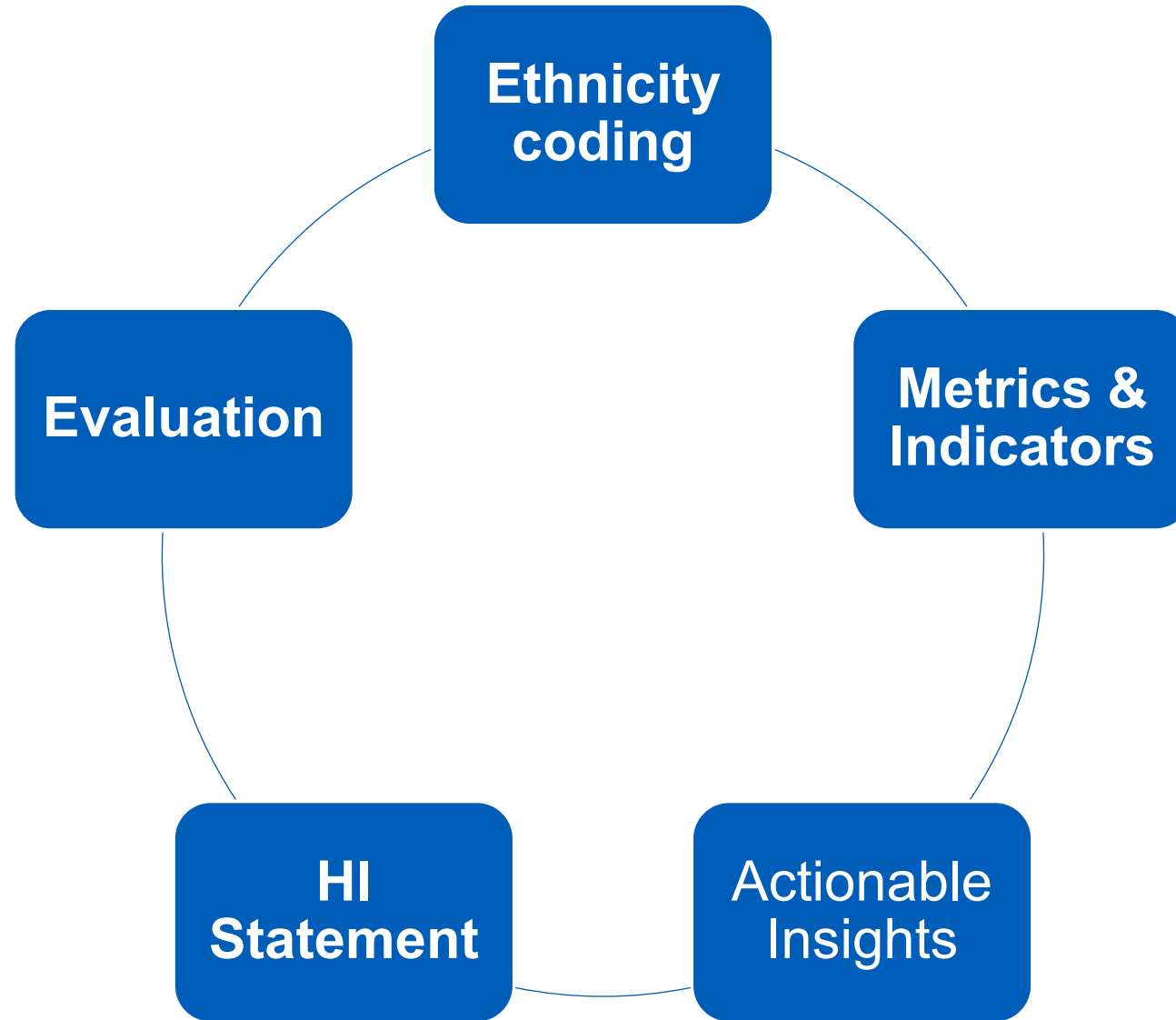
Supporting digital inclusion in Cheshire and Merseyside: Our toolkit and approach (June 2023)



**Inclusive digital healthcare: a framework for NHS action on digital inclusion** [Mitigate against digital exclusion](#)

**A national framework for NHS – action on inclusion health**

# Data and Impact





# On plus groups...

Mars is not difficult to reach for those that are committed. So we don't have hard to reach groups but underserved groups as we are not doing enough

Ask a question

# Embrace your Agency to Act







# The year is 2035 .....

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## Thank You



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