



DEVELOPING PUBLIC HEALTH RESEARCH TO HELP STRENGTHEN LOCAL GOVERNMENT

We're building better, more useful knowledge for decision-making

'WE'RE DEVELOPING PUBLIC HEALTH RESEARCH TO HELP STRENGTHEN LOCAL GOVERNMENT.'

A healthy population both reflects and contributes to a healthy society. Securing better health adds legitimacy and value to public services. That's one reason why local government is excited to be leading public health improvement. We know that housing, planning, community safety and policing, education, licensing and transport can have big health impacts - at least as big as the NHS.

→ SUPPORT FOR PROFESSIONALS IN LOCAL GOVERNMENT

Local authority professionals want to know what's possible: SPHR@L is here to highlight wide-ranging opportunities to improve the health of communities. But we go beyond identifying the possible to focus on the achievable and deliverable. It's not enough to show something works in academic research in a different place and circumstances. Professionals in local government want to know: 'Will it work given my budget, national policy, local political realities, regulations and the concerns of community groups?' We help these professionals to develop the right evidence at the right time to answer these questions and support local innovation.

→ UNDERSTAND WHAT IS NEEDED FOR THEIR EVERYDAY WORK

SPHR@L does not simply translate public health research into practice-ready material. We work with local practitioners to develop a broader approach to local government research, understanding the kinds of evidence needed and the ways people apply it in their everyday work.

→ HELP PROFESSIONALS TO ENHANCE THE PUBLIC GOOD

Working together on developing evidence has great potential. People in local government do more than contract services to provide safe, clean streets, sound transport, good housing and schooling environments. They are committed to the public good. They are interested in the knock-on effects of policies – good and bad – beyond what happens to specific groups. That's why partnership with public health research works so well and is helping local government to make a bigger difference.



MATT EGAN
SPHR@L Team Leader

WE'RE TACKLING IMPORTANT QUESTIONS ABOUT...



... HEALTH INEQUALITIES

How can we improve the health of those in greatest need?
Can community empowerment make a difference and reduce health inequalities?



... AGEING WELL

Is it important for older people that benefits, such as the Freedom Pass, are available to everyone regardless of their needs and incomes?



... ALCOHOL

Which are the successful council policies for reducing damage to health caused by alcohol?



... EFFECTIVE EVIDENCE FOR POLICY AND PRACTICE

What evidence is needed locally to support improvements in public health? Is it different from what the NHS needs?



Find us online at:
sphr.lshtm.ac.uk



Follow us:
[@SPHRatLSHTM](https://twitter.com/SPHRatLSHTM)



HEALTH INEQUALITIES

Social inequalities in health persist, even in wealthier countries. We are interested in identifying how health interventions might address, or perpetuate, inequalities.

For example, we ask whether health in less advantaged areas can be transformed by empowered community decision-making. Might greater control at a community level offer health benefits, including reduced health inequalities?



We're studying areas in England where communities have each been given £1m to invest as part of the 'Big Local' programme. How are 'Big Local' communities formed and who decides on spending? Do people feel personal health improvements? What's the effect on health inequalities? Does taking part improve a community's ability to access additional resources and lead to wider health benefits beyond the Big Local programme?

We are also examining the potential impact of e-cigarettes on health inequalities. Are children and young people likely to have tried them? Are there significant variations in use along gender, ethnicity or socio-economic lines?

We're working with these SPHR partners on Health Inequalities, Alcohol and Ageing Well and other projects:

FUSE: Centre for Translational Research in Public Health (Newcastle, Durham, Northumbria, Sunderland & Teesside universities)

University of Bristol

University of Cambridge

University of Exeter Medical School

ScHARR (University of Sheffield)

LiLac (Liverpool & Lancaster universities)

UCL

<http://sphr.nihr.ac.uk>



ALCOHOL

What can local authorities learn from other councils on improving health by reducing the harm caused by alcohol? Are councils using their powers well and do they need more?

Local councils have long controlled alcohol sales for community safety and to reduce crime. Can current licensing powers also support improvements in public health?



A local authority can make it harder to acquire new or extended licences by declaring a Cumulative Impact Zone. We are evaluating whether such zoning can effectively reduce alcohol-related ill-health.

We are also evaluating the health impacts of voluntary agreements widely adopted by retailers to stop selling super-strength beer and cider.

By looking at the use of legal powers and the effectiveness of local innovations, we aim to support local authorities that want to reduce unhealthy drinking levels and to discover whether existing powers and exemplar practices are sufficient to meet councils' new public health responsibilities.



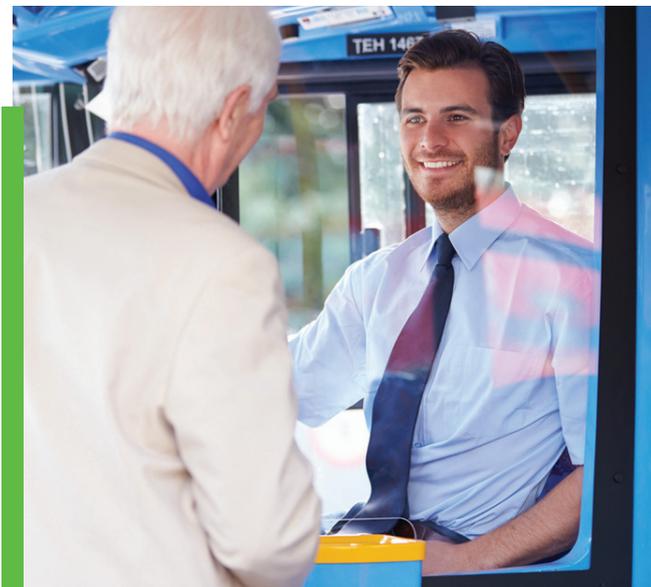


AGEING WELL

How important is it for older people that benefits, such as the Freedom Pass, are available to everyone regardless of their need? Is it a vital part of citizenship, recognition and inclusion in later years which means-testing could damage, leading to reduced well-being?

The Freedom Pass (offering free public transport to older people) and Winter Fuel Payments are available to everyone. Could these benefits be rationed according to need and/or income but still retain their good effects on well-being?

We're examining whether universality provides status, respect and inclusion - just as jobs and parenthood often do earlier in life. Do people experience these benefits as payback for a life of work, rather than as a mark of diminished dignity, as some might regard means- or needs-tested benefits? Would isolation and health inequalities increase if some benefits, such as the Freedom Pass, become no longer available for everyone and some had reduced access to transport?



SPHR@l's multidisciplinary team has extensive expertise in working with local government and research expertise in:

Complex decision-making

Medical science

Food and Alcohol

Environment Transport

Inequalities

Smoking

Education

Sexual health

Community development

Human behaviours

Economics

Housing



EFFECTIVE EVIDENCE FOR POLICY AND PRACTICE

What do we need to know locally to support improvements in public health? Do those in housing, transport and education sectors need different types of evidence than those working in the NHS?



Our research shows that the feasibility of a change locally is often more important to decision-makers than its proven effectiveness generally. Professionals in local government have to be satisfied that, locally, an intervention can be accepted, afforded and delivered. So we try to show practitioners not only that an intervention works generally but that it would work for them.

We aim to make locally available evidence more rigorous. Modelling helps to test-drive change. Area level data is good for stakeholders. So is very local data, spotlighting pockets of housing, single streets and blocks, even a street corner.

We collect individual stories that are so valuable to local decision-makers. It all helps to link public health strategies to non-health sector strategies that can lever the social determinants of health.



sphr.lshtm.ac.uk

‘WE’RE DEVELOPING PUBLIC HEALTH RESEARCH TO HELP STRENGTHEN LOCAL GOVERNMENT.’

“We see public health as strongly dependent on actions and decisions taken outside the health sector. So SPHR@L tries to identify, and undertake, research that helps to highlight the public health costs and benefits of those decisions.”

MARK PETTICREW

SPHR@L Programme Co-Lead and
Professor of Public Health Evaluation,
LSHTM

“There are real opportunities to improve the health of communities through housing, transport, policing and public safety, licensing, education and other local authority responsibilities.”

KAREN LOCK

SPHR@L Programme Co-Lead and
Reader in Public Health, LSHTM



SPHR@L is partner in the wider NIHR School for Public Health Research, comprising eight UK universities and research centres of excellence. We're based at the London School of Hygiene & Tropical Medicine in London.

SPHR@L

Faculty of Public Health & Policy
London School of Hygiene & Tropical Medicine
15-17 Tavistock Place
London WC1H 9SH

Further information:

T: +44 (0)20 7927 2258

E: sphr@lshtm.ac.uk