



The Health Creation Alliance's submission to Labour's National Policy Forum March 2023

Labour should ensure that Health Creation is adopted and embedded across the whole health and social care system, particularly in places with the highest levels of poverty and poorest health outcomes.

To reduce health inequalities, all Integrated Care Systems (ICSs) and their constituent parts need to:

- recognise Health Creation as equally important in addressing health inequalities as the treatment of illness and prevention of ill-health
- adopt and embed Health Creation at place, neighbourhood and system levels as a routine way of working

What is Health Creation?

Health Creation describes the process through which individuals and communities gain a sense of purpose, hope, mastery and control over their lives and environments; when this happens their health and wellbeing is enhanced. There is plenty of evidence that this is the case. 'Pre-prevention' might be one way to describe Health Creation.

Building meaningful and constructive Contact between people and within communities increases our Confidence which leads to greater Control over our lives and the determinants of our health. Having Control over our lives and environments is proven to enhance health and wellbeing. Control, Contact and Confidence are the 3Cs of Health Creation.

Prof Michael Marmot is clear: *"To tackle inequality, society needs to enable all children, young people and adults to maximise their capabilities and have control over their lives"*. (Health Equity in England: The Marmot Review 10 years on).

Evidence of the benefits of health creation

There is growing data on the benefits of community strengthening. A [meta-analysis](#) showed a 50 % increased likelihood of survival for people with stronger social relationships, consistent across age, sex, cause of death. The magnitude of this effect is comparable with quitting smoking and it exceeds many well-known risk factors for mortality (e.g. obesity, physical inactivity). The overall effect controlled for age, sex, initial health status, follow-up period, and cause of death.

In Wigan, compulsory health creating training took place across the whole workforce leading to improved health outcomes and reduced demand for services.

There are many examples, across the world, of community strengthening improving health inequalities and changing local and national policies.

There is some evidence that community strengthening reduces demand, too. A controlled set of [studies](#) in Newcastle, designed by academics, clinicians and local people, found an annual 9% saving on secondary care services after ramping up the service. These savings came from reductions in outpatients, electives and A+E attendances.

Overall, the Social Return on Investment of community strengthening, particularly those that share and shift power to communities, runs at about 1:4.

Services must help create the conditions for people and communities to take control

They can adopt and embed the six features of health creating practices within everyday practices:

- Listening and responding
- Truth-telling
- Strengths-focus
- Self-organising
- Reciprocity
- Power-sharing and power-shifting

These features are the things that communities consistently say makes the biggest difference to their health and wellbeing: these are the 'active ingredients' of [Health Creation](#).

Health Creation is beginning to happen in pockets everywhere

However, most ICSs will not prioritise its wholesale adoption at a senior level until they are required to. Currently, there are very few drivers towards Health Creation across current policies, legislation, contracts, frameworks, assessment processes, maturity matrices.

At our conference, **Health Creation: *Coming of Age*** The Health Creation Alliance demonstrated how Health Creation can support ICS development, Population Health Management, NHS Spaces, Core20PLUS5 and economic development by NHS anchors. This approach needs to be adopted wholesale. See:

- Feature in [National Health Executive](#)
- Videos from Coming of Age [sessions](#):

Health Creation deserves Labour's attention now because:

- It is a proven approach to reducing health inequalities
- It can reduce demand on health, social care and other services
- It enhances people's confidence and ability to address the wider determinants of health such as suitable housing and employment
- ICSs offer a rare opportunity to devolve power to and share power with communities.

A government needs to take action because otherwise ICS and Place Leaders will remain narrowly focused on treating illness and on more immediate issues such as waiting lists.

These are the policy changes we would recommend

- **Redefining the purpose of the NHS** – to treating illness + preventing ill-health + creating health
- **Requiring all ICSs to invest a proportion of ICS budget to support health creating activity** in communities with the highest levels of poverty and worst health outcomes. Actively supporting and funding independent organisations to scale and spread Health Creation
- **Requiring the NHS to adopt simple measures of Health Creation in performance monitoring**, such as measuring social capital.
- **Develop incentives and levers that support the practice and development of Health Creation** and co-production with communities across all professions. These could include:
 - A Community Power Act, like the Community Empowerment (Scotland) Act 2015, creating a statutory basis for Community Planning Partnerships.
 - Making Health Creation explicit in all maturity matrices
 - Every area to use an evidence-based community building model –for instance community development.
- **Every local authority to expand local community-based options.** Tools already in the Care Act should be in use to deliver more localised community capacity.

- **Invest in ‘Community Health Creators’:** people with a track record in successful asset-based community development.
- **Enable an NHS workforce with the time, capacity and skills to be a real and valued partner to community-strengthening.**
- **Provide dedicated funding to strengthen the evidence-base for Health Creation.**
- **Health in All Policies:** require an assessment of the impact of every new government policy on people’s health, before adopting it.
- **Encouraging ICSs to substitute some national indicators for local indicators** that have been co-produced with communities. Create new outcome measures based on the 3Cs, focusing on what matters to people.

The Health Creation Alliance would be pleased to discuss these recommendations with the Party.

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