

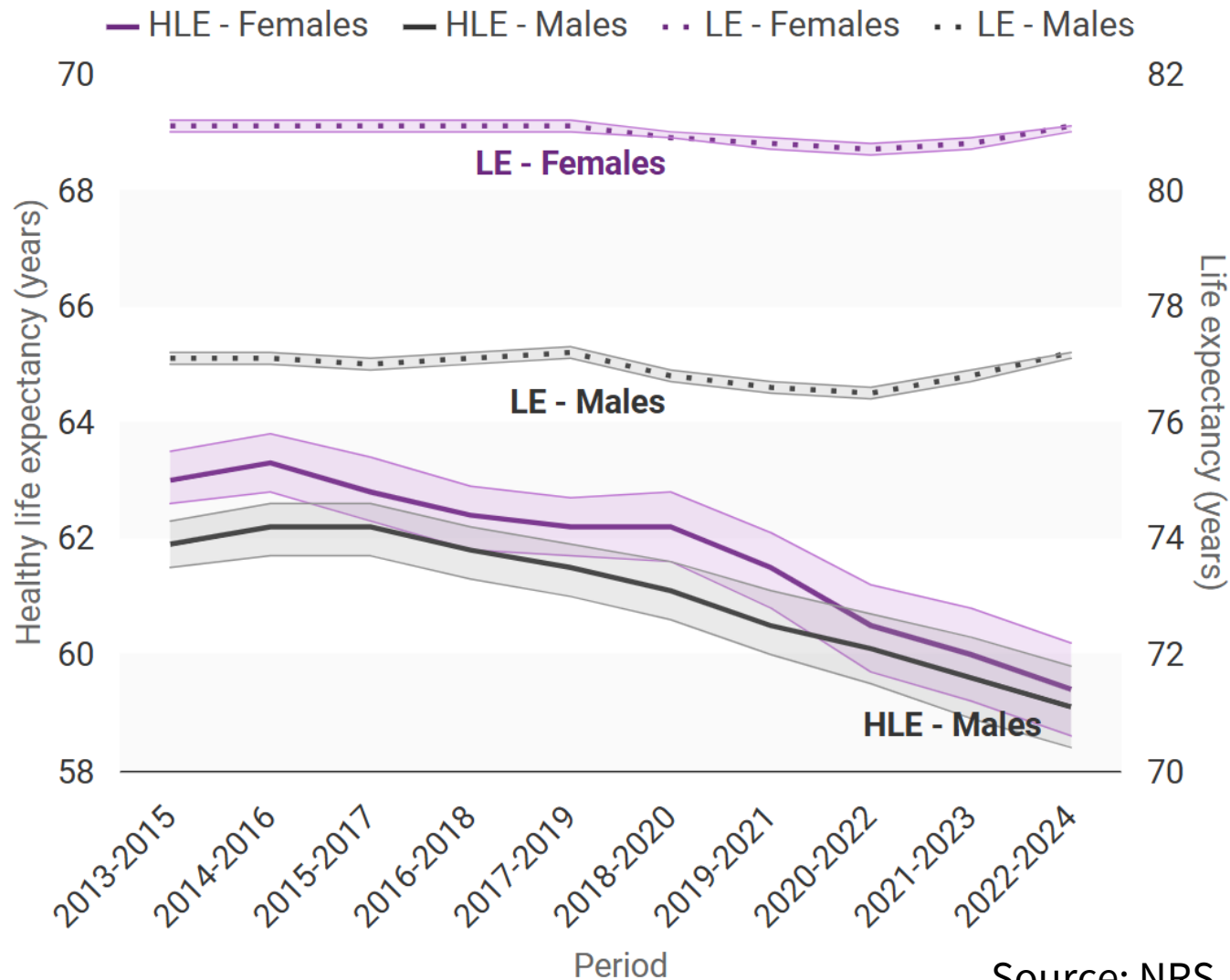
PHS, Collaboration for Health Equity Scotland (CHES), Social Prescribing

**Michael Kellet, Director of Strategy, Governance and Performance -
Public Health Scotland**



A Glance at the State of Scotland's Health

Scotland's Health Inequalities



Source: NRS

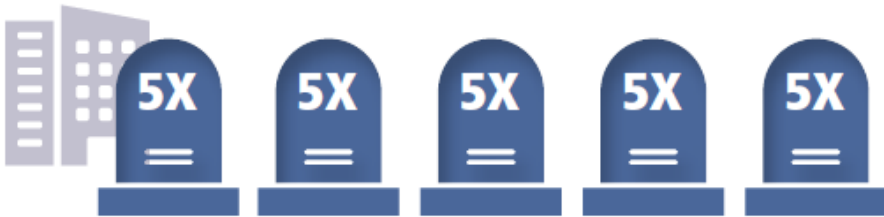
- People in Scotland's most deprived communities will spend a third of their lives in poor health, compared to those in the least.



Inequalities are **wide** but can be **reduced**

Inequalities impact
how long and well
we live.

People living in our poorest neighbourhoods are nearly **5 times more likely to die from preventable conditions** than those in our wealthiest.

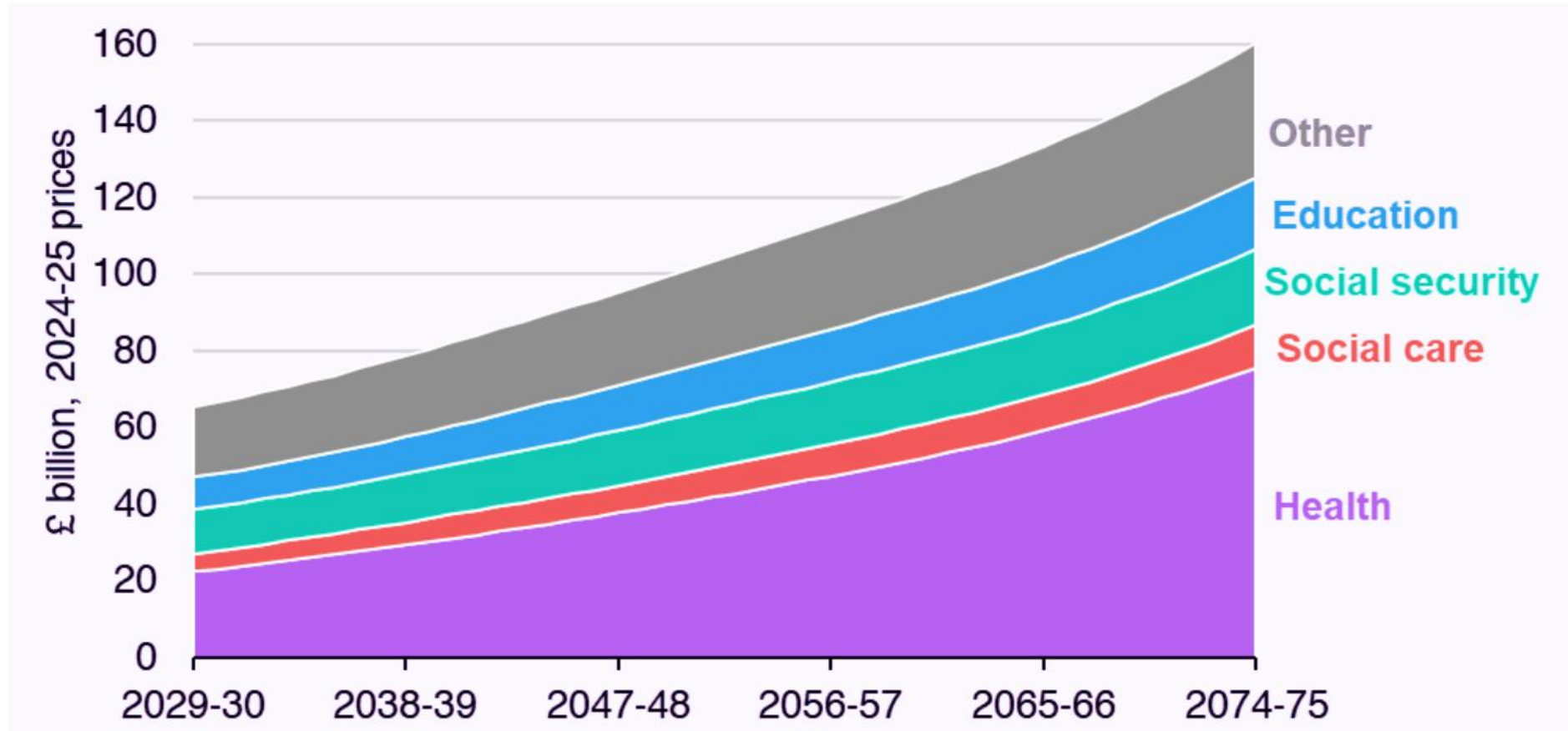


People in our poorest neighbourhoods get **25 fewer years in good health** than those in our wealthiest.



Services are becoming unsustainable

Projected devolved public spending, 2029-30 to 2074-75



Source: Scottish Fiscal Commission



Services are becoming unsustainable

Unfair differences in income, wealth and power are important drivers of health and health inequalities in Scotland. Our lives are affected by the communities in which we live. For people to thrive the building blocks of a healthy society all need to be in place.

Employment



Housing



Education and skills



Childhood experiences



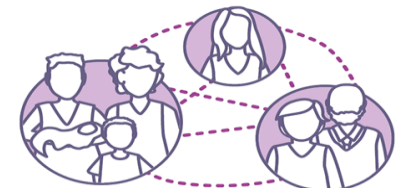
Economic stability



Healthcare



Social and community



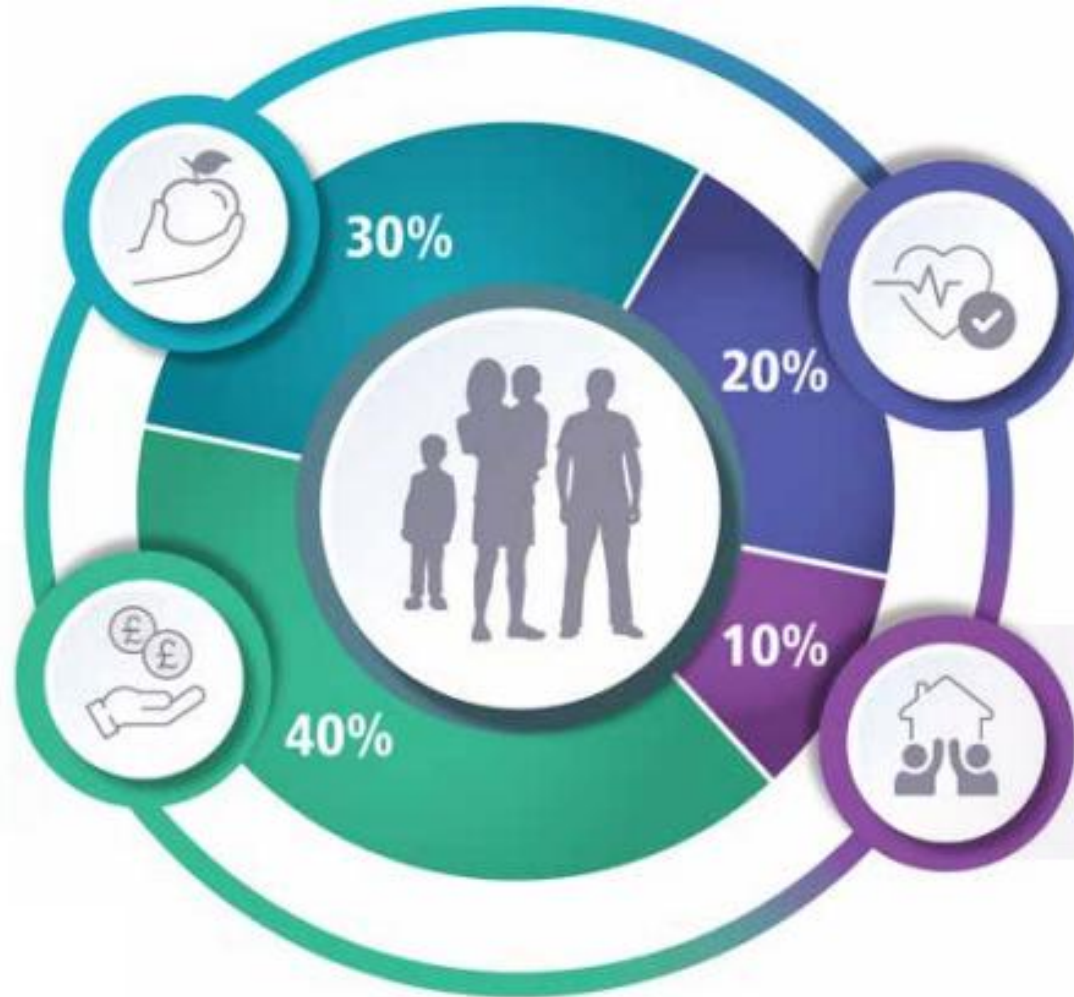
Factors that shape our health: four categories and their impact

Health behaviours

which are driven by the availability and affordability of products like healthy food, alcohol and tobacco.

Social and economic factors

, like family income, education and having nurturing relationships from birth.



Health services

and our ability to get timely access to quality care.

Places and communities

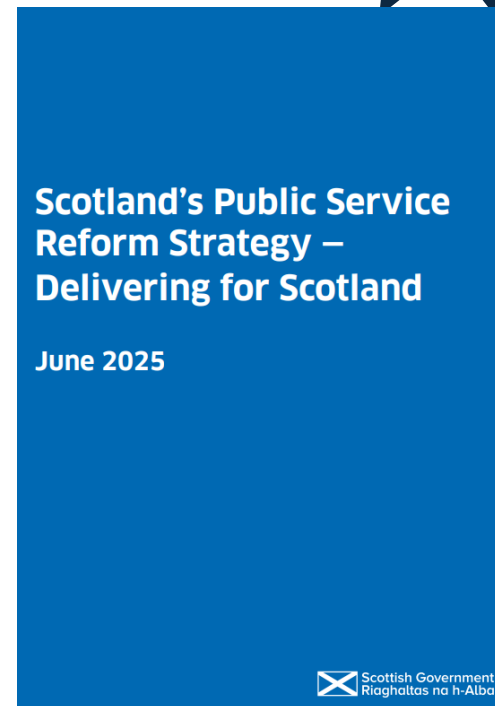
which support us and allow us to access the activities and services we need.



Prevention to Improve Population Health

Prevention is a Policy Priority

Putting prevention at the heart of the way we do budgeting, strategy and policy



Delivering a Prevention Focussed System

For every £1 invested in prevention the public gets back:



£46 for legislation
(i.e. Smoking ban)



£34 for vaccines
(i.e. Covid, HPV)



£5 for improving healthcare
(i.e. disease management)

source: [BMJ Journals](#) | Return on investment of public health interventions: a systematic review



PHS 10-Year Strategy

Together we can create a Scotland where everybody thrives

Our 10-year strategy to 2035



5 drivers of action: how PHS organises its contribution to change

The five drivers we'll focus our actions on are:

1. building a prevention-focused system
2. improving social and economic factors
3. strengthening places and communities
4. enabling healthy living
5. providing equitable access to health and care

To make sure we're delivering the greatest impact, we'll publish a yearly report on Scotland's health. This report will show the progress we've made against each of these drivers, highlight the challenges we face and set out evidence-based actions to drive further improvement.



Our 2035 vision for a thriving Scotland

Driven by robust data and the voices of people in Scotland, we've set an ambitious, but achievable, path for a fairer future.



→ Close the gap

No one's neighbourhood, income or background decides how long or well they live.

→ Prevention first

Scotland shifts resources upstream to stop problems before they start.

→ Protect Scotland's health

Scotland is ready, responsive and resilient to health threats.

→ Healthy start for every child

Every child has the best possible start, free from poverty.

→ Thriving whole life

Everyone enjoys more healthy years, not just the better off.

→ Fair access, faster care

Everyone gets timely, high-quality care, especially those in the poorest areas.

→ Champion mental health and wellbeing

Mental health is valued, support is available and stigma is reduced.

→ Data for action, insight for all

Scotland is a world leader in using trusted data, AI and lived experience to inform decisions.

→ Healthy places, healthy people

Every community is designed for health.

→ Reduce harm from tobacco, alcohol, drugs and unhealthy food

Scotland sees the greatest improvements in the communities that need them most.

Social Prescribing

How PHS is supporting national social prescribing work

PHS is helping shape Scotland's national approach through partnership, shared learning and practical infrastructure

Shape the framework

Work with Scottish Government leads to guide framework development - engagement and connections across sector partners.

Learn across nations

Draw on experience from Wales, Ireland, Northern Ireland and England, including challenges and practical lessons.

PHS contribution

Connecting policy, partners and learning to support a national framework for Scotland

Convene five-nations learning

Support a 20 October workshop with round-table discussion on framework development and Scotland's key challenges.

Build sustainable infrastructure

Explore a national core data set.

PHS is connecting policy, shared learning, national engagement and digital infrastructure



The Collaboration for Health Equity in Scotland (CHES)

Partnerships and collaboration



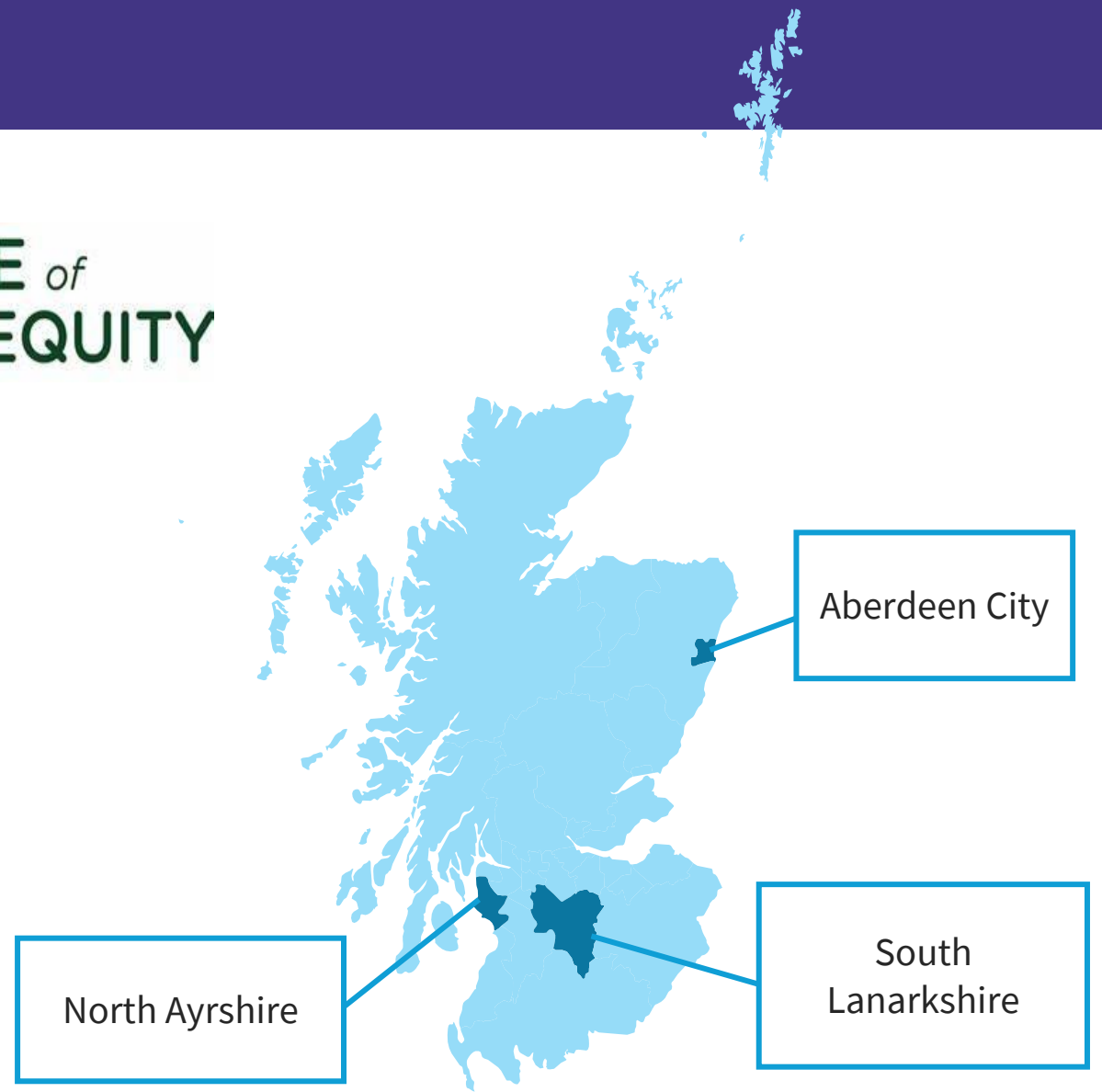
The Collaboration for Health Equity in Scotland (CHES)

A two-year collaboration working to strengthen and accelerate the action already underway to:

Improve
Scotland's
health

Increase
wellbeing

Reduce
health
inequities



Marmot Reviews and Marmot Principles

Give every child the best start in life.

Enable all children, young people, and adults to maximize their capabilities and have control over their lives.

Create fair employment and good work for all.

Ensure a healthy standard of living for all.

Create and develop healthy and sustainable places and communities.

Strengthen the role and impact of ill health prevention.

Tackle racism, discrimination, and their outcomes.

Pursue environmental sustainability and health equity together



Summary of key emergent learning to date

1) The importance of leadership for getting traction on health equity

2) Agreeing impactful action at a place level requires stronger mechanisms for combining evidence, local data and local community voice

3) Must improve accessibility of information on strength of evidence behind different interventions including decision support modelling tools

4) More effective prioritisation to tailor resources to needs is critical to addressing inequalities

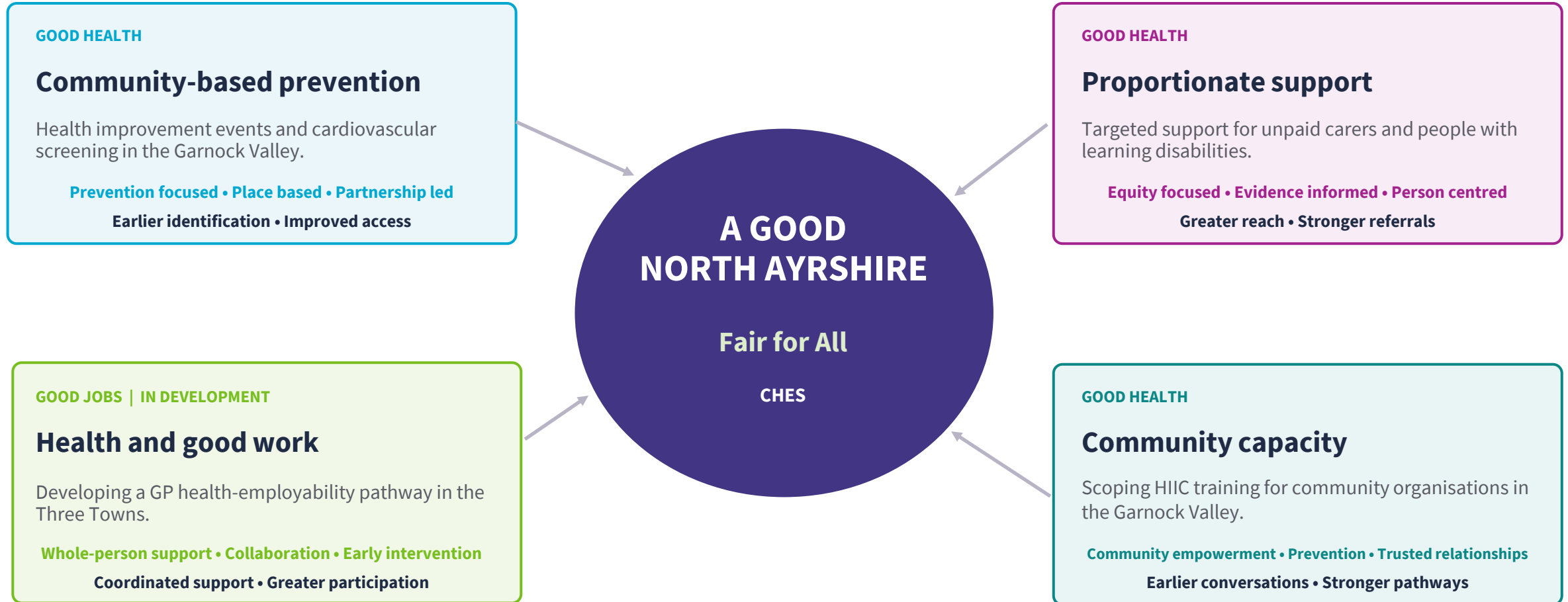
5) Work on anti-racism and climate must be integral to the other six Marmot Principles

6) Role of local business and philanthropy



CHES Principles in Action: North Ayrshire

Turning local insight into practical support



Reform, next steps, questions?

michael.kellet@phs.scot