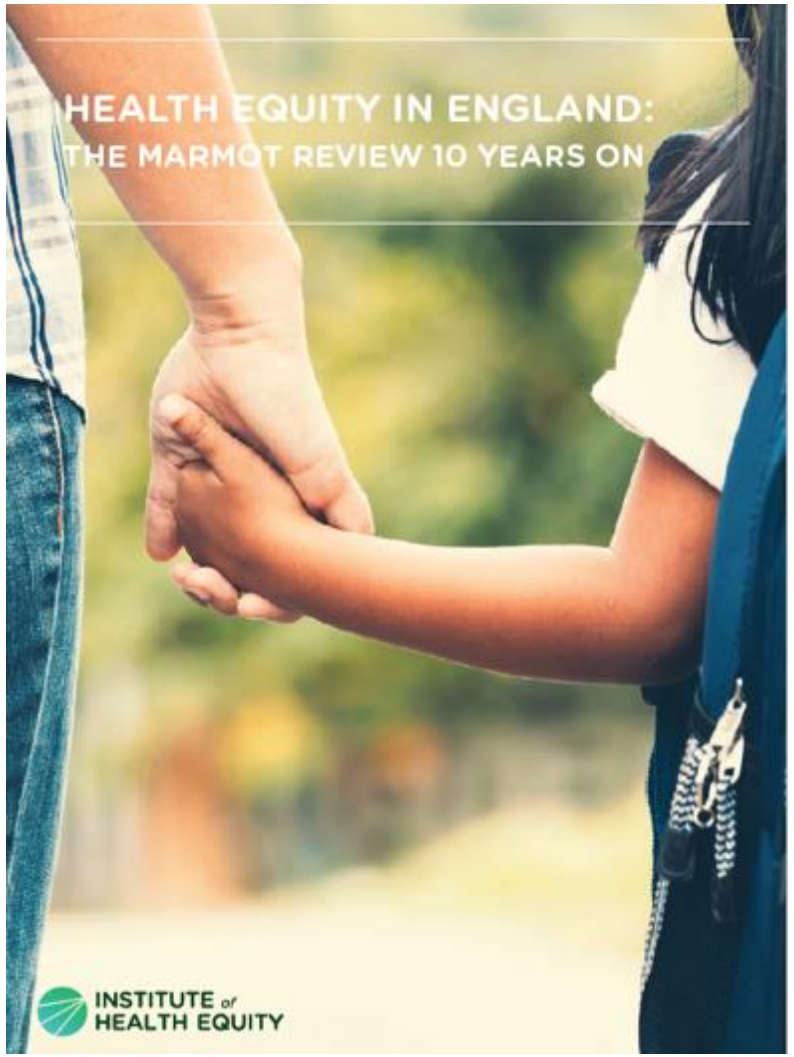
Marmot places and organisations

Dr Jessica Allen

www.instituteofhealthequity.org

Major national reports



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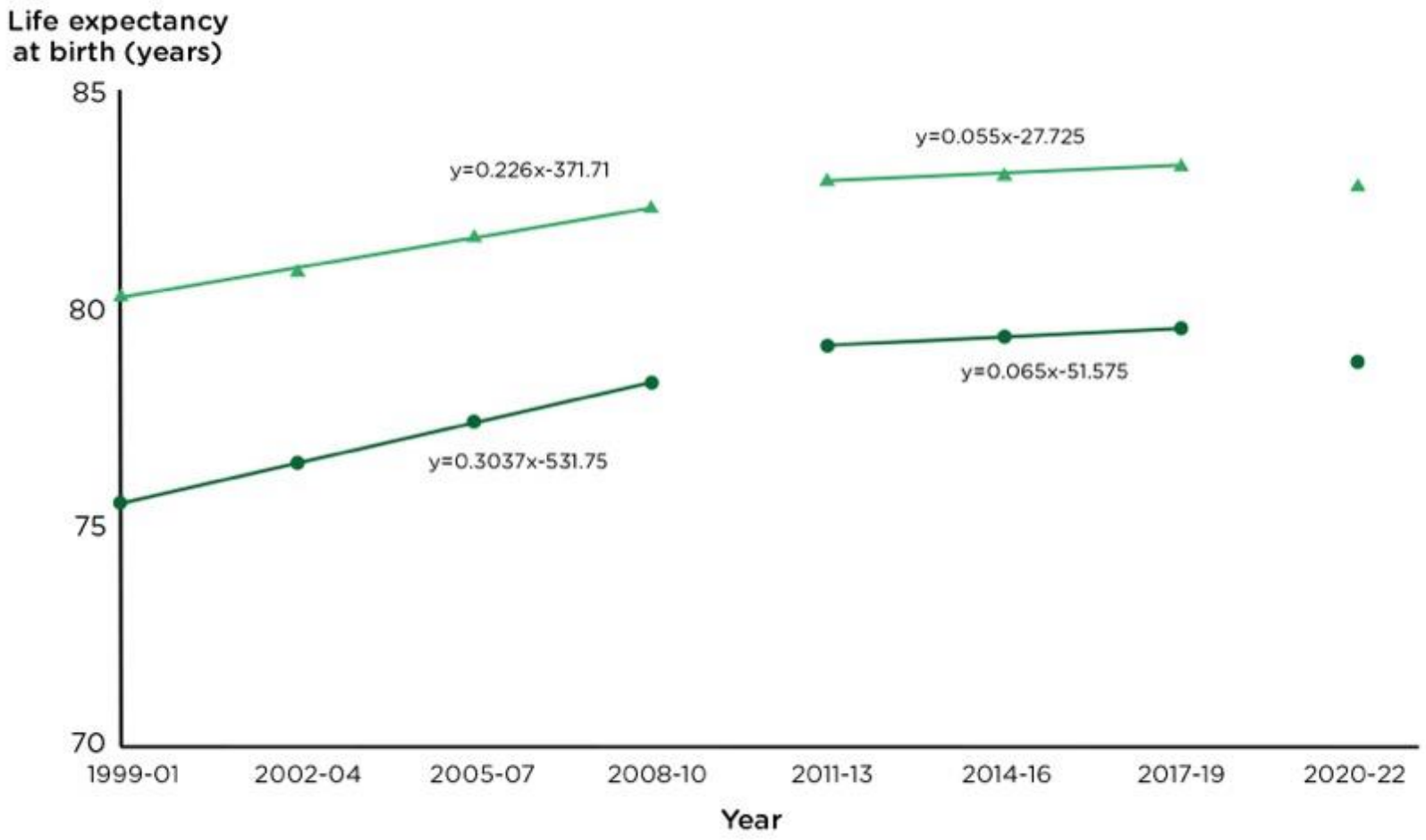
Drivers of health - Marmot Principles

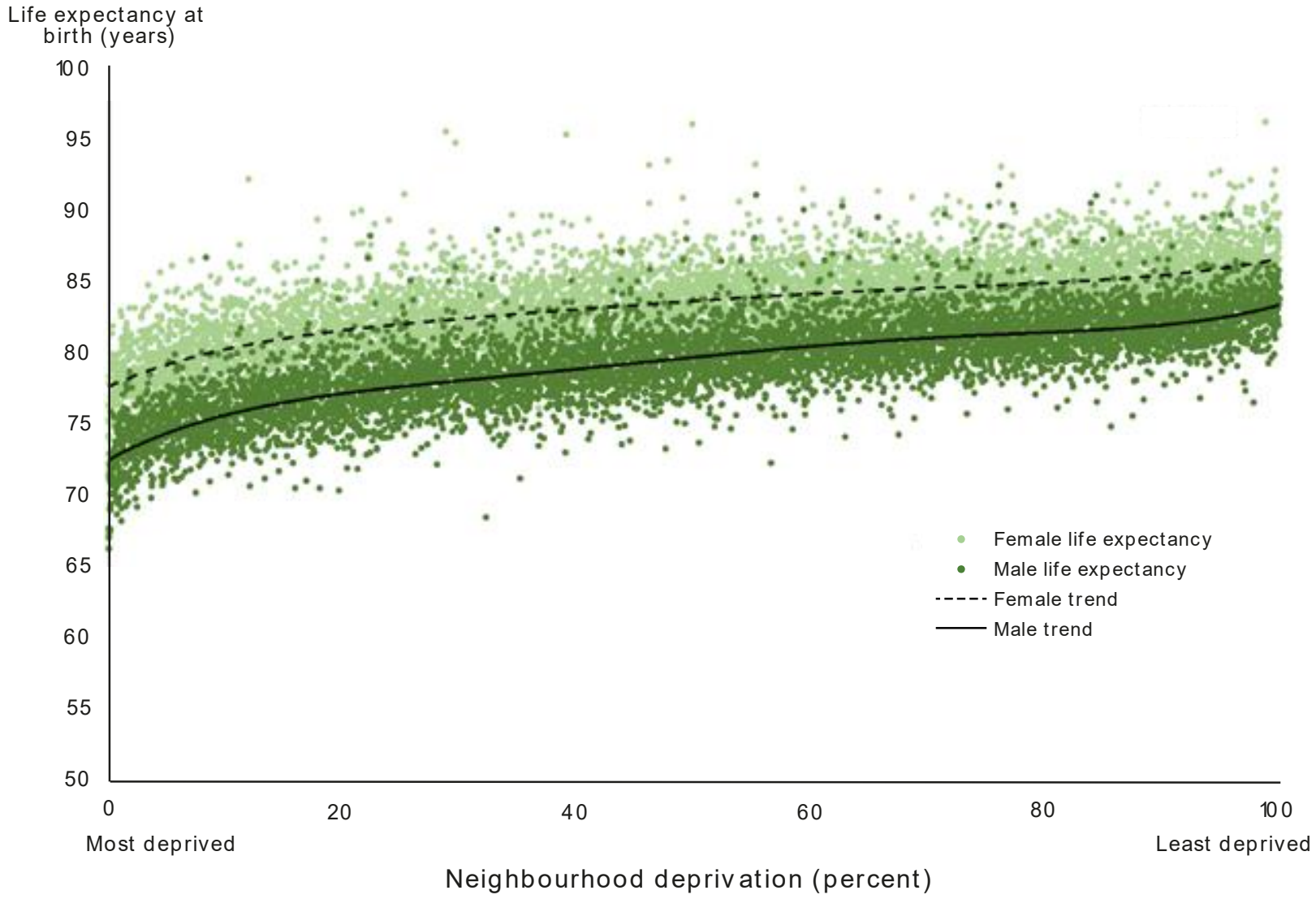
1. Give every child the best start in life
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill health prevention
7. Tackle racism, discrimination and their outcomes
8. Pursue environmental sustainability and health equity together

Life expectancy at birth, England, 1999-2001 to 2020-22

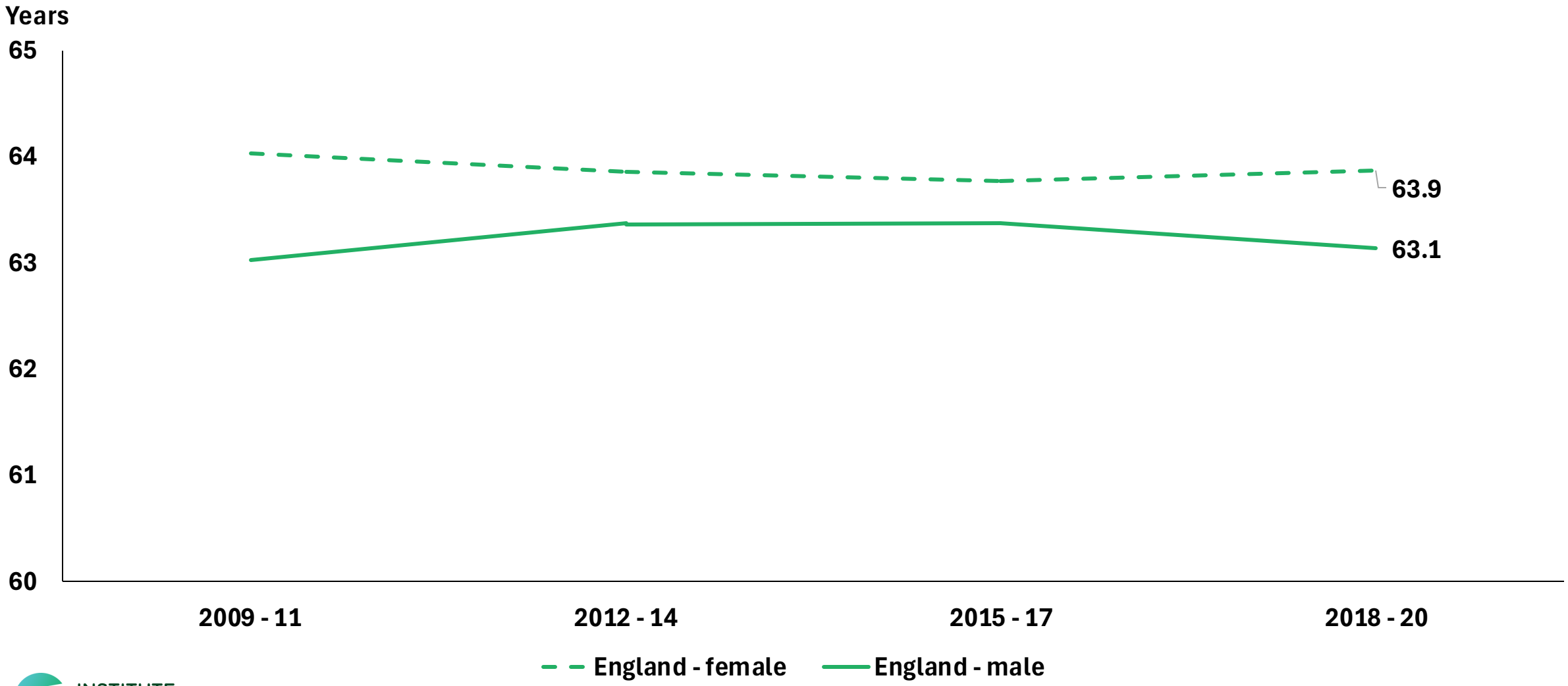


Source: ONS (2024)
National life tables; England

Figure 1.4. Life expectancy at birth for neighbourhoods in England, by sex and level of deprivation, 2016–20



Healthy life expectancy, by sex, and England, 2009-11 to 2018-20



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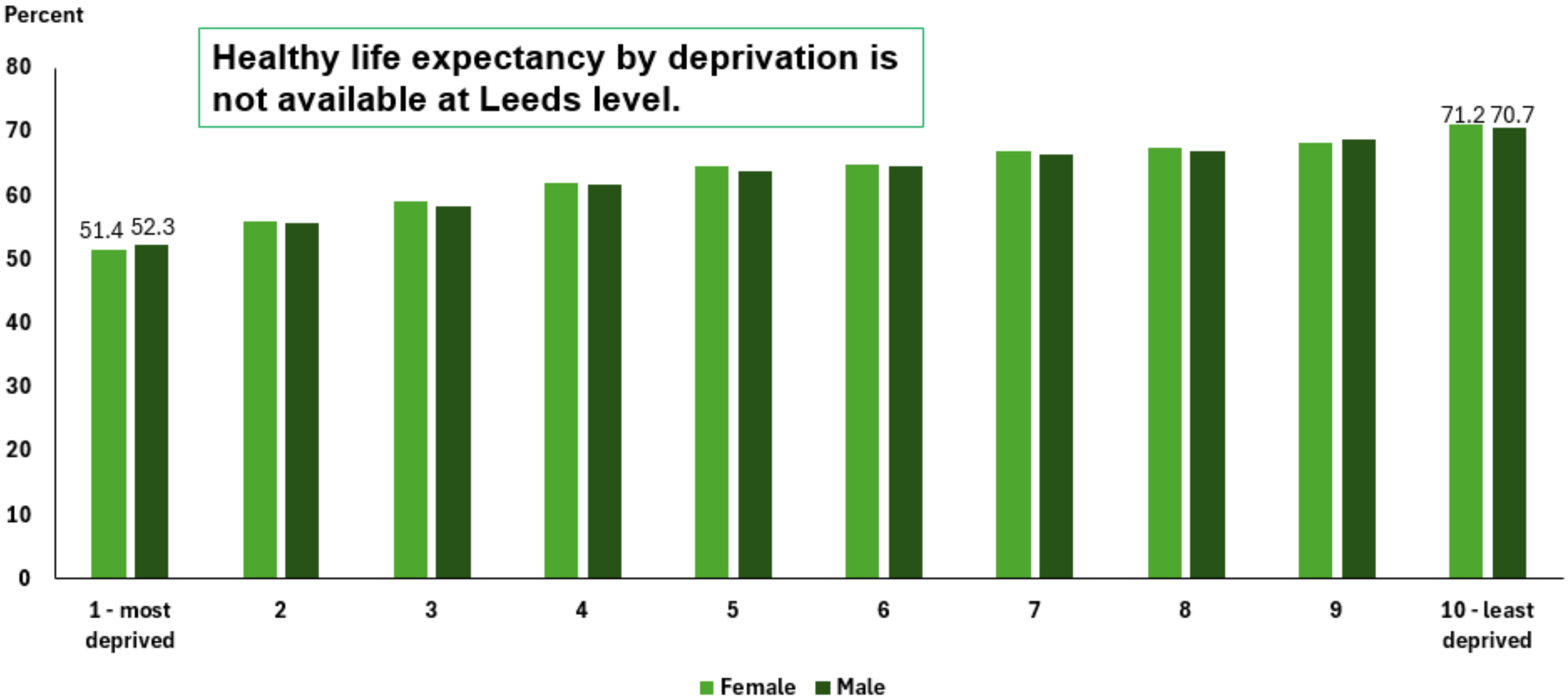
Source: *Office for National Statistics*

Healthy life expectancy, by sex, and deprivation, England, 2017-19



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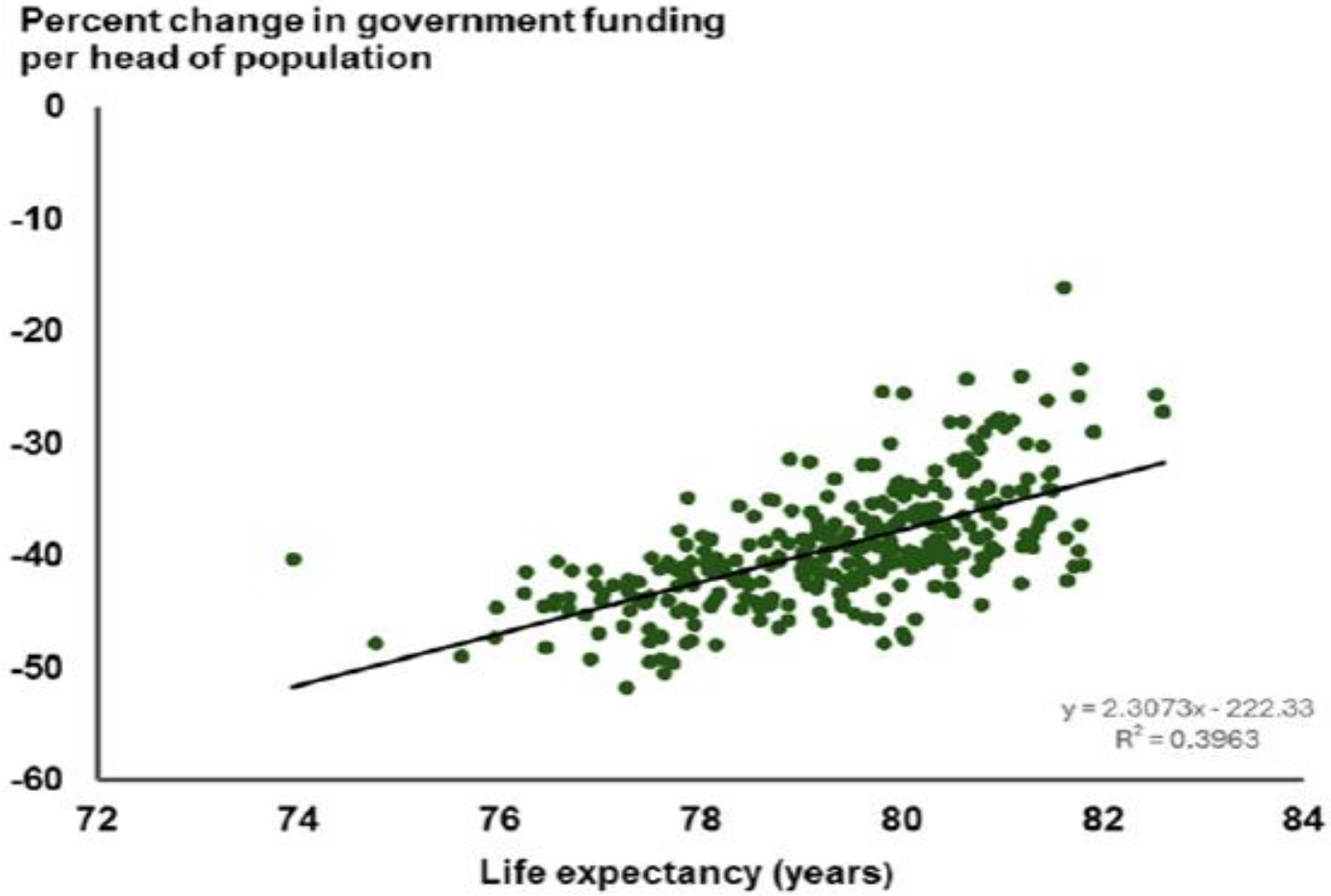
Source: *Office for National Statistics*

Change in government funding per head of population by 2019/20 by male life expectancy in 2010-12, local authorities in England



Source: NAO (2023) and ONS (2024)

Working outside national context

- Places
- Sectors
  - Healthcare
  - Public services
  - Local government
  - Business
  - Community voluntary sector organisations
- Workforce
  - Healthcare
  - Public health
  - Business
- The Health Equity Network a social movement

Health Equity 'Marmot' Places – 60 + local authorities covering 43 percent of UK population

- Coventry
- Greater Manchester
- Cheshire and Merseyside
- Lancashire and Cumbria
- Luton
- Waltham Forest
- Gwent
- Leeds
- Southwest region
- Wokingham
- Medway
- Northumberland

2024

- Scotland national
  - Aberdeen City
  - North Ayrshire
  - South Lanarkshire
- Kent
- Oxfordshire

2025

- Newcastle
- Kings Lynn and West Norfolk
- Isle of Man
- East Suffolk
- North East Lincs
- North Tyneside

To be confirmed

- Birmingham
- Wales national and local areas.
- Mid West Ireland

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A Health Equity ‘Marmot’ Place…

Recognises:

Health and health inequalities are mostly shaped by **the social determinants of health**

Assesses:

Inequalities in health and the social determinants of health

Actions already happening

Identifies:

Gaps in existing approaches

Action to go further to reduce inequalities

Evaluates:

How partners within a place can work together more effectively

Strengthens the health equity system in a place and collaborations with the national system

Develops and delivers approaches to tackle health inequalities

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Key points

Places proactively come to us.

There is no national health inequalities strategy

Each place is different.

There is no blueprint

Usually led by public health in Local Government or Combined Authorities. Occasionally NHS system.

We develop a 2 year programme with the place leading to recommendations, implementation and action.

Marmot approach - Impacts on places

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Drivers of health - Marmot Principles

1. **Give every child the best start in life**
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. **Create fair employment and good work for all**
4. **Ensure healthy standard of living for all**
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill health prevention
7. Tackle racism, discrimination and their outcomes
8. Pursue environmental sustainability and health equity together

System Change and Culture Shifts and the health equity system

- Governance
- Leadership
- Advocacy
- Partnerships on SDH
- Training/capacity building
- Prioritisiation - health equity in all policies
- Community involvement

- Local government
- Public services
- Voluntary, Community Social Enterprise Sector
- Healthcare
- Education
- Private sector
- Community

Transformational processes

- Proportionate Universalism
- Resource allocation
- Accountability mechanisms
- Contracts and commissioning for health equity and the SDH
- Monitoring and indicators

Public Health, Education, Libraries & Adult Learning, Procurement, Economy and Jobs

Coventry City Council

Coventry & Warwickshire Chamber of Commerce

Office for Health Improvement & Disparities

West Midlands Police

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Coventry Marmot Steering Group
Partnership working

Department for Work & Pensions

West Midlands Fire Service – protect and serve

Voluntary Action Coventry

CWLEP Coventry & Warwickshire Local Enterprise Partnership

COVENTRY UK CITY OF CULTURE 2021

Coventry Independent Advice Service

positive youth foundation

FWT a centre for women

Cheshire and Merseyside

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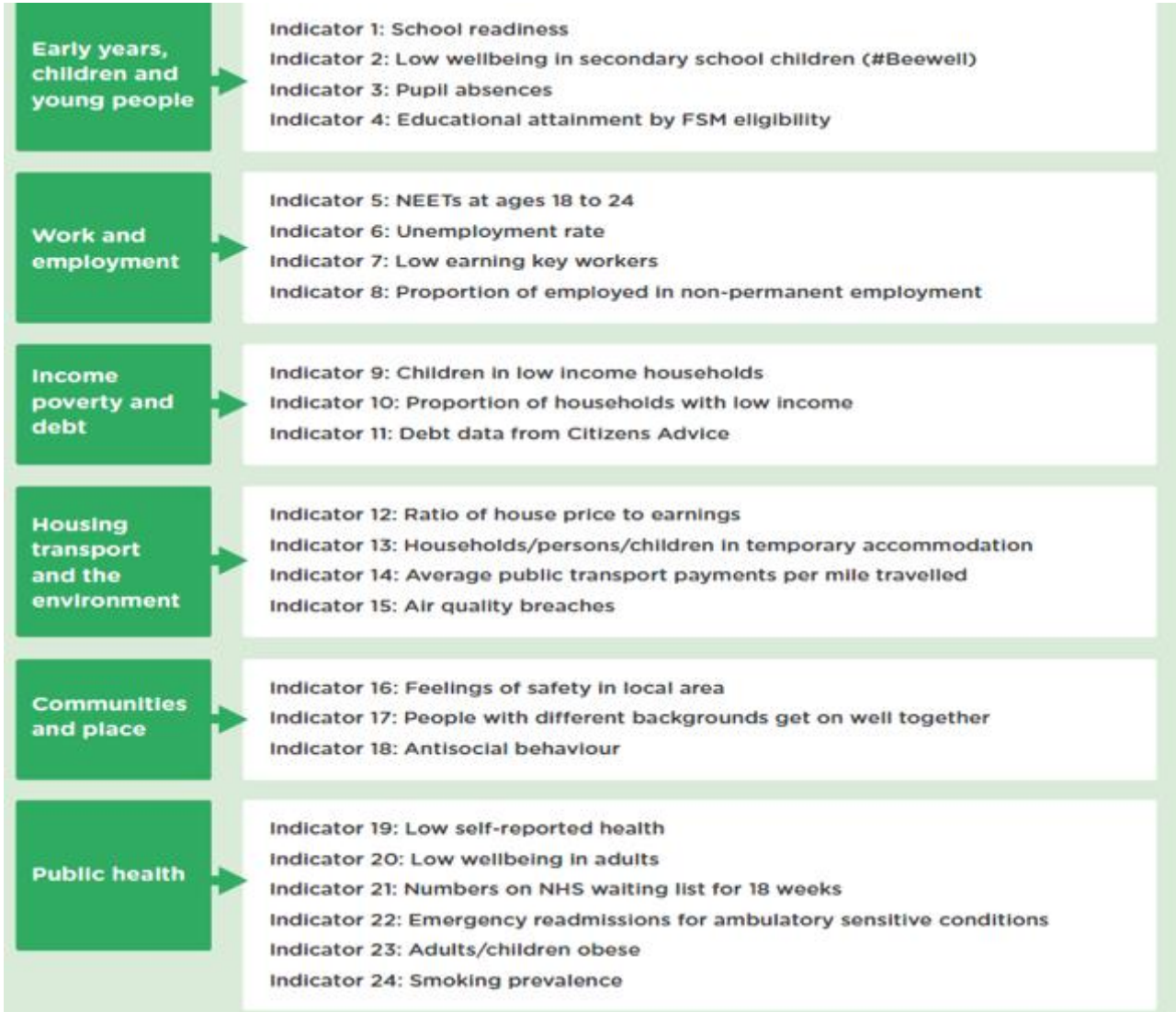
All Together Fairer

The Marmot Programme for Cheshire and Merseyside

Working together to improve health and wellbeing in Cheshire and Merseyside

October 2023

Greater Manchester - 2021



Coventry - 2023

Marmot monitoring tool

Home | Adult social care and health | Health and wellbeing | Public health | Policy | Coventry: A Marmot City | Marmot monitoring tool

- → Introduction
- → Headline statistics
- → Coventry: a Marmot City - the story so far
- → How we will measure how well we are doing

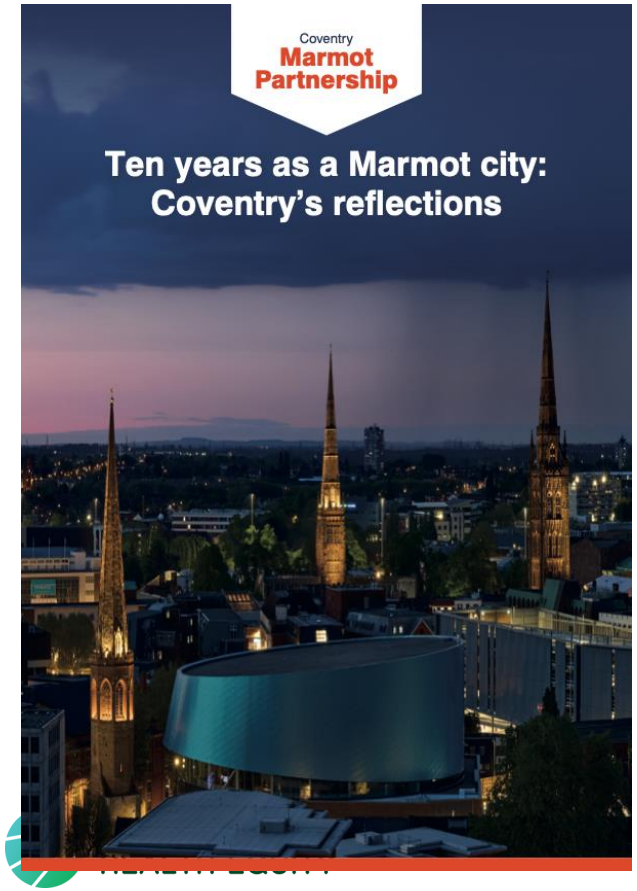
Marmot principles

- → 1. Give every child the best start in life
- → 2. Enable children, young people and adults to maximise capabilities and have control over their lives
- → 3. Ensure a healthy standard of living for all
- → 4. Create fair employment and good work for all

Overviews - 2024

Coventry: Ten Years as a Marmot City

https://www.coventry.gov.uk/marmot-moitoring-tool/ten-years-marmot-city



For us in Coventry, the Marmot Partnership and being a Marmot city is at the centre of all we do…with the sole aim of reducing unjust inequalities that exist within our communities.

2020, independent evaluation

Coventry had demonstrated a commitment to making fairer decisions to improve the health of residents. There were positive signs of progress…and Coventry was doing well compared to similar places elsewhere in the UK.

Manchester and Luton evaluation

Luton

Reflections from assessment of strategies and interviews about what has happened. Development of Monitoring framework

A stronger health equity system

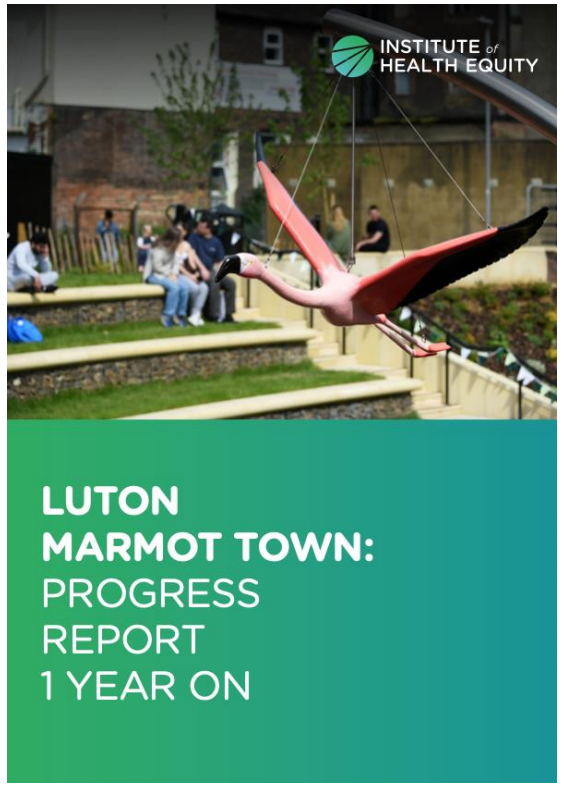
Clear governance and accountability

Building capacity

Tackling racism, discrimination and their outcomes as a priority area for development

Resource allocation

Recommendations for the future



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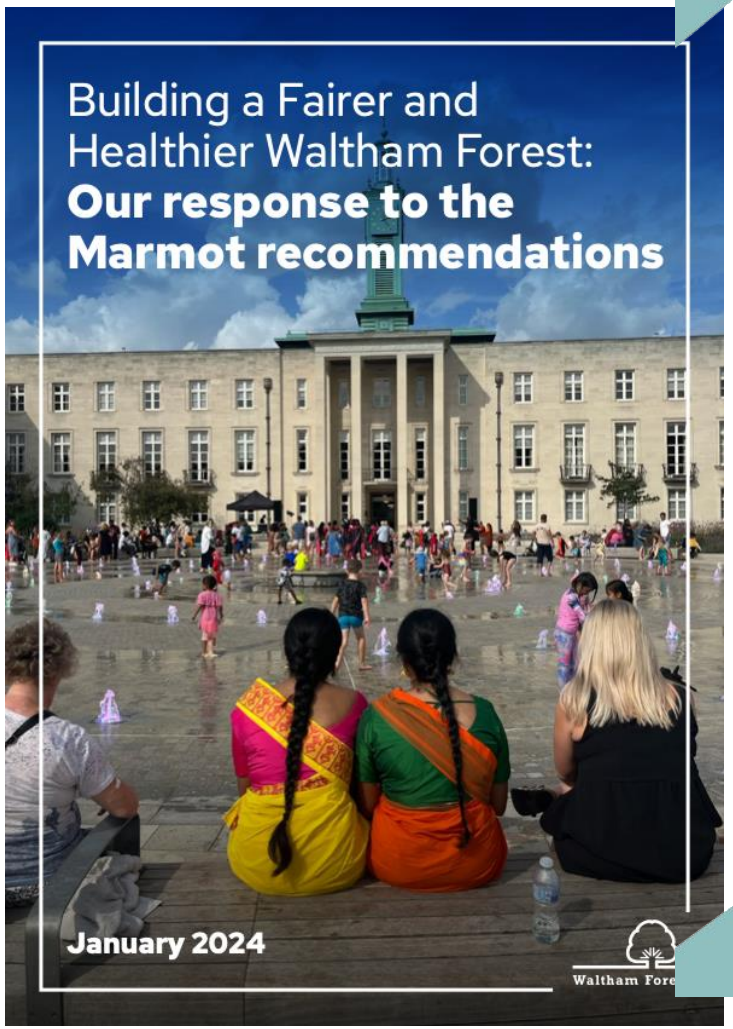
Responses and overviews



Annual Public Health Report 2023
Luton - a Health Equity Town

MAKING MANCHESTER FAIRER

8 themes

Early years, children & young people	Poverty, income & debt	Work & employment	Prevention of ill health & preventable deaths	Homes & housing	Places, transport & climate change	Systemic & structural racism & discrimination	Communities & power

6 principles

Proportionate universalism & focus on equity	Respond to & learn from the impact of COVID 19	Tailor to reflect the needs of Manchester	Collaboration, creativity & whole system approach	Monitoring and evaluate to ensure we are narrowing the gaps	Take a life course approach

4 ways of involving communities ‡

Listen to us	Trust us	Employ us	Create & support the conditions for social connections to develop & flourish

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Healthcare


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HEALTH
INEQUALITIES:
IMPROVING
ACCOUNTABILITY
IN THE NHS


DOCTORS
FOR HEALTH
EQUITY
The role of the World Medical Association, national medical associations and doctors in addressing the social determinants of health and health equity
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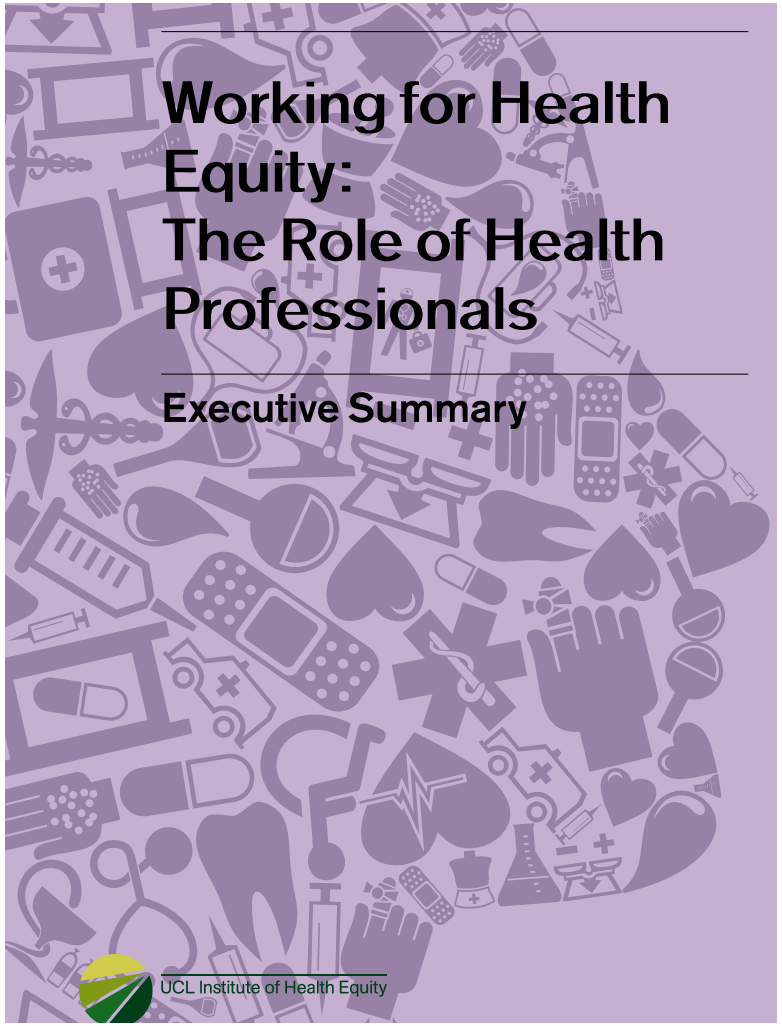
HEALTH EQUITY
WMA

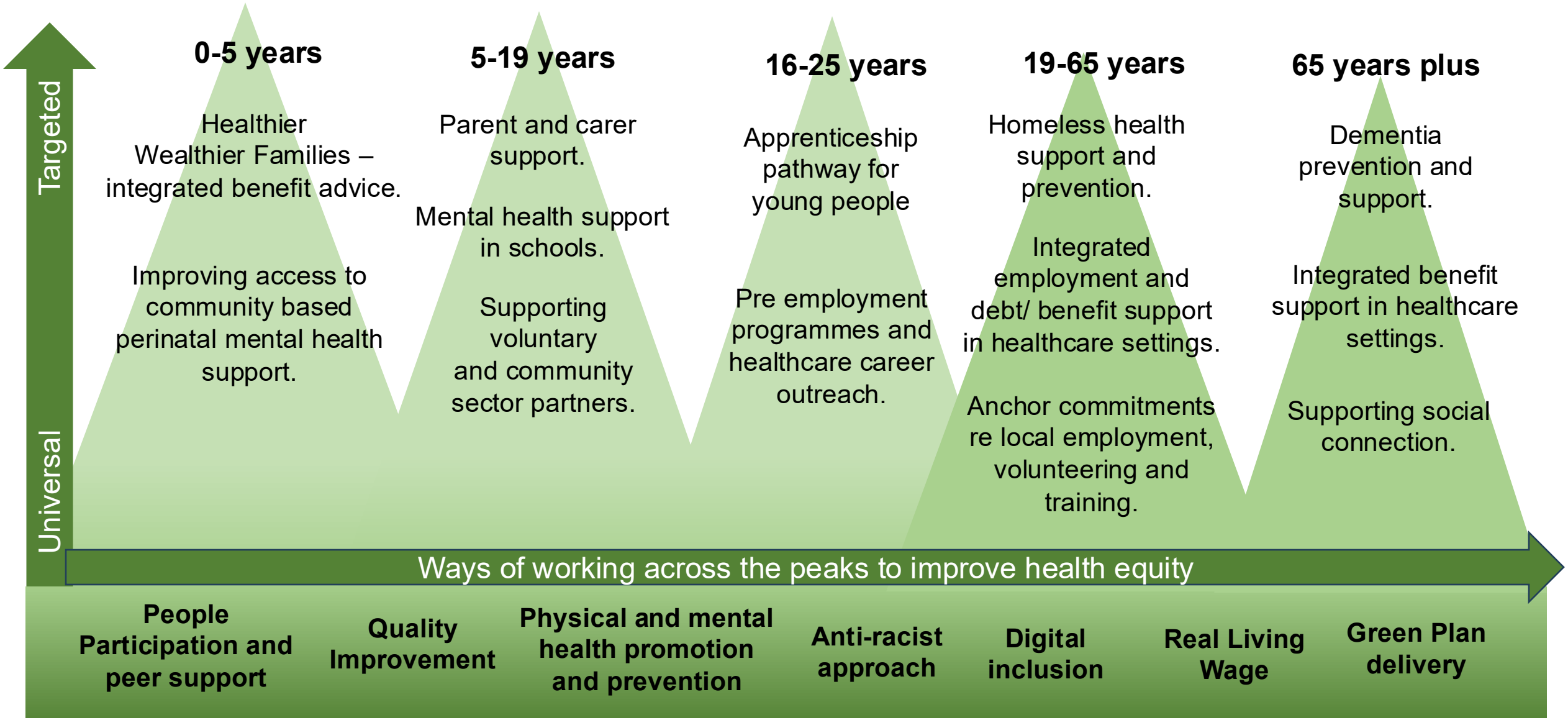

CHE
Centre For Health Economics
UNIVERSITY of York
Health Equity Indicators
for the English NHS
Richard Cookson, Miqdad Asaria,
Shehzad Ali, Brian Ferguson,
Robert Fleetcroft, Maria Goddard,
Peter Goldblatt, Mauro Laudicella,
Rosalind Raine
CHE Research Paper 124

Working for Health Equity: The role of health professionals



- Workforce education and training
- Working with individuals and communities
- NHS organisations
- Working in partnership
- Workforce as advocates

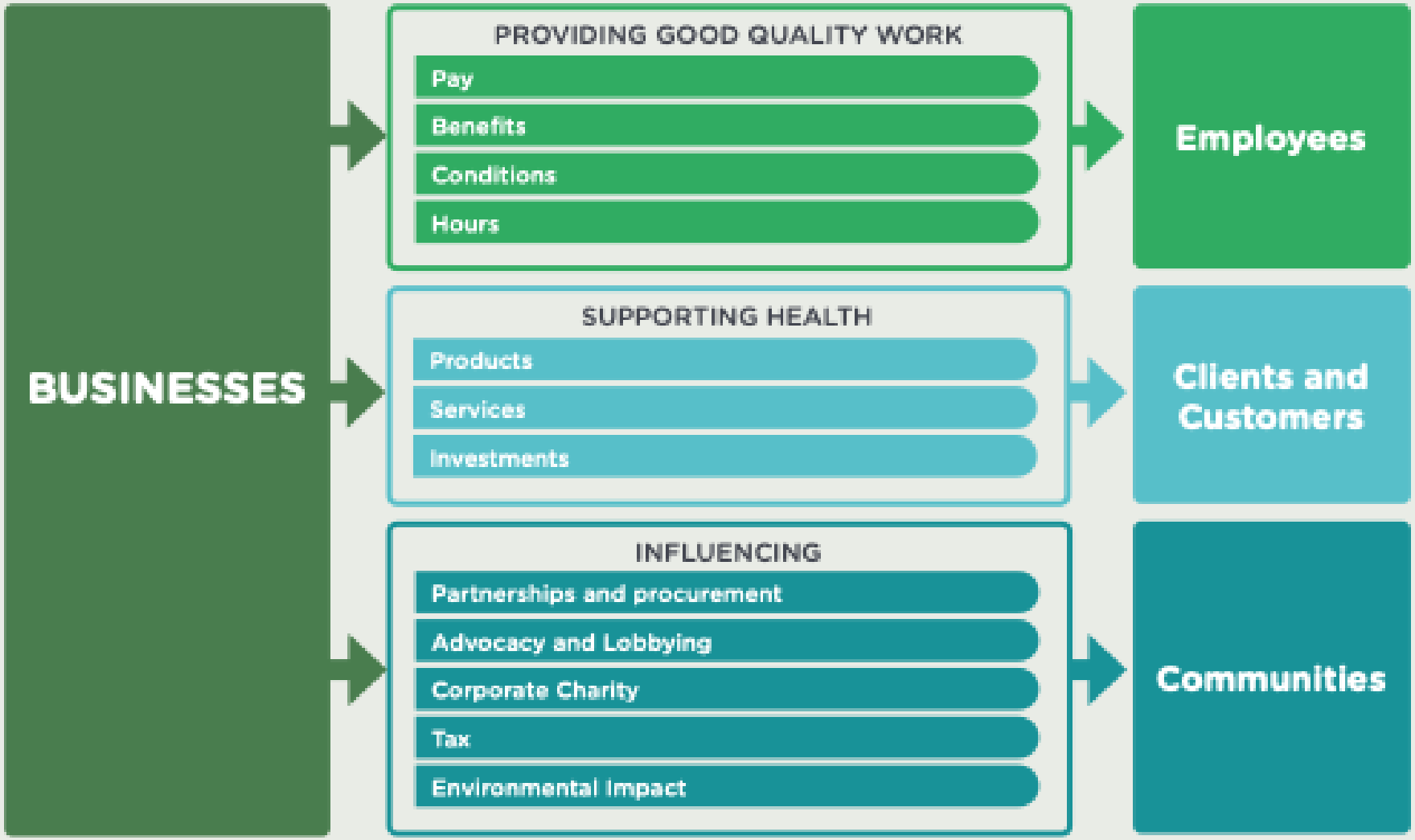
ELFT Marmot Mountains

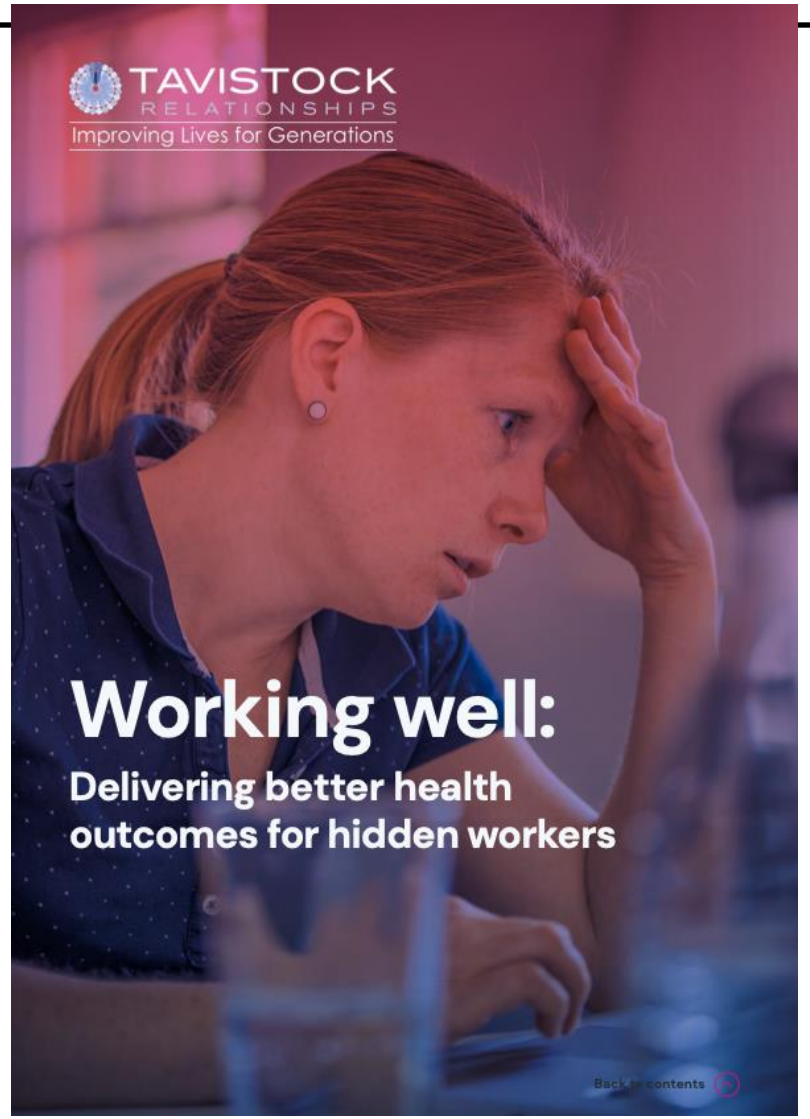


Integral to the above is good working relationships with community and place-based partners.

Role of business

Figure 1. How businesses shape health: the IHE framework





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Voluntary and community sector

- Locally – learning from the CVFSE sector how to take action and partnerships

- 3 large national community voluntary sector organisations adopting the approach
  - Barnardos — Partnerships with health care system on the SDH
  - Turning point — Employees
  - British Red Cross — Services

The Health Equity Network

Aims:

Collaboration and knowledge sharing on health equity and the social determinants of health

Drive national and global action through partnerships, conferences, webinars, and thematic working groups

Build a social movement for health equity, fostering dialogue across public, private, and voluntary sectors

Over 7000 members (October 2025)

SCAN ME

Legal & General

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