



DEBATE PACK

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70th anniversary of the NHS and public health

By Alex Bate
Alexander Bellis

Summary

On 16 May 2018 at 9:30am, there will be a Westminster Hall debate on the 70th anniversary of the NHS and public health. This debate pack collates a few resources that look at the history of the NHS and some comments that are being made on its anniversary.

The rest of the paper outlines the public health systems across the UK and recent reforms and strategies that have been adopted.

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The House of Commons Library prepares a briefing in hard copy and/or online for most non-legislative debates in the Chamber and Westminster Hall other than half-hour debates. Debate Packs are produced quickly after the announcement of parliamentary business. They are intended to provide a summary or overview of the issue being debated and identify relevant briefings and useful documents, including press and parliamentary material. More detailed briefing can be prepared for Members on request to the Library.

1. Background

1.1 70th Anniversary of the NHS

The term National Health Service (NHS) refers to the public healthcare systems in England, Wales and Scotland. The system in Northern Ireland is called Health and Social Care (HSC).

Different legislation was required to create these health systems the *National Health Service Act 1946* (in England and Wales), the *National Health Service (Scotland) Act 1947*, and the *Health Services Act (Northern Ireland) 1948*, although all these healthcare systems began in July 1948: 70 years ago this year. Several websites have attempted to provide a timeline of the NHS since then, including:

- [Nuffield Trust's NHS timeline](#) looks at the NHS' history until the 2017 General Election.
- [The Health Foundation's policy navigator](#) looks at the history of health policy (mostly in England) across a number of different themes.
- NHS Choices, [The history of the NHS in England](#)
- [NHS Scotland](#) and [NHS Wales](#) both have produced timelines of their respective health systems. Health is a devolved matter and all the constituent parts of the UK have different structures.

Further reading

The House of Commons Library has published a wide range of material about the NHS. The full list of health service briefings can be found on the [Commons Library website](#) or [Parliament's Research briefings](#) page.

There are several think tanks in the UK which report on health, such as the [King's Fund](#), the [Nuffield Trust](#), the [Health Foundation](#), [Reform](#), and the [Centre for Health and the Public Interest](#).

The 70th anniversary of the NHS has also been picked up by news media. For instance:

[NHS at 70](#), *British Medical Journal* (A series of articles on the state of the NHS)

[What's in store for the NHS's 70th birthday?](#) *Independent*, 1 January 2018

[The NHS turns 70 this year, and it's Britain's greatest medical innovation](#) *Guardian*, Jan 2018

[The NHS at 70 and Alma-Ata at 40](#), *Lancet*, 6 January 2018 (access via Library subscription)

[After 70 years of universal health care, is the NHS at a crisis point?](#) *CNN*, 13th February 2018

[The future of the NHS: no longer the envy of the world?](#) *Lancet*, 17 March 2018 (access via Library subscription)

[As We Mark 70 Years Of The NHS, We Can All Help End Our Public Health Crisis](#), *Huffington Post*, 10 April 2018 (an article by Nick Smith, Labour MP for Blaenau Gwent).

1.2 Public health in England

The *Health and Social Care Act 2012* transferred responsibility for the provision of a range of public health services from the NHS to local authorities; the first time that councils have had a statutory role in the provision of healthcare since 1973.¹

As a result, since 1 April 2013 upper-tier and unitary authorities have been responsible for improving the health of their populations, backed by a ring-fenced grant.²

Central government grants for public health

The Department of Health and Social Care annually announces the grants given to local authorities for their public health spending. In December 2017, the Department published its [Public health grants to local authorities: 2018 to 2019](#). The King's Fund has analysed these allocations and has found that "public health funding per head is due to fall by a further 6% between 2017-18 and 2019-20".³ The Government is considering reform of the grant. At the same time as releasing the 2018-19 allocations, the Government announced that it will:

Consult on options for fully funding local authorities' public health spending for current public health duties from their retained business rates receipts as part of the move to 100% rates retention.⁴

Local authorities' public health duties are overseen by local Directors of Public Health. The Government maintains a list of current [Directors of Public Health by area](#) and has produced [guidance](#) (2012) about their responsibilities.

More background on these reforms can be found in section 7 of the Library paper, [The Structure of the NHS in England](#).

Local authorities' duties

A [Department of Health guide](#) (published 2011) sets out the commissioning responsibilities of local authorities under the post-2013 arrangements. This includes:

- tobacco control and smoking cessation services

¹ *The National Health Service Reorganisation Act 1973* transferred responsibility for community services (with the exception of environmental health) from local authorities to the NHS. The *Local Government Act 2000* gave local authorities a statutory responsibility to improve the economic, social and environmental circumstances in their area; the *Health Act 2001* also gave councils health scrutiny powers.

² The Department of Health has allocated a ring-fenced public health budget to local authorities of £2.7 billion and £2.8 billion for 2013-14 and 2014-15.

³ [Chickens coming home to roost: local government public health budgets for 2017/18](#), King's Fund, 12 July 2017. See also [Spending on public health](#), King's Fund, May 2017

⁴ [Local authority circular, Circular No LAC \(DH\)\(2017\) 2](#), Department of Health, 21 December 2017

- alcohol and drug misuse services
- public health services for children and young people
- interventions to tackle obesity such as community lifestyle and weight management services
- increasing levels of physical activity in the local population
- public mental health services
- dental public health services
- accidental injury prevention
- population level interventions to reduce and prevent birth defects
- behavioural and lifestyle campaigns to prevent cancer and long-term conditions
- local initiatives on workplace health
- comprehensive sexual health services
- local initiatives to reduce excess deaths as a result of seasonal mortality.⁵

There are also a number of statutory public health functions, that local authorities are required to carry out. These are set out in part 2 of the [Local Authorities \(Public Health Functions and Entry to Premises by Local Healthwatch Representatives\) Regulations 2013 \(SI 2013/351\)](#), and include:

- Weighing and measuring of certain children in their area;
- Providing or making arrangements for health checks for eligible people. Local authorities must also provide information about dementia to older people;
- Providing, or making arrangements to secure the provision of open access sexual health services in their area;
- Providing a public health advice service to any Clinical Commissioning Groups (CCGs) in their area;
- Providing information and advice to certain persons and bodies within their area in order to promote the preparation of, or participation in, health protection arrangements against threats to the health of the local population, including infectious disease, environmental hazards and extreme weather events.

Since October 2015, local authorities have also been mandated to provide, or make arrangements to carry out, the five universal health visitor reviews for mothers and babies.

In January 2018, the Government launched a consultation on [Local authority public health prescribed activity](#) to review the impact of these regulations. The consultation closed on 17 April 2018.

In discharging its public health duties, the actions available to local authorities, as permitted by section 12(3) of the *Health and Social Care Act 2012*, are:

- (a) providing information and advice;

⁵ [Commissioning responsibilities](#), Department of Health, 2011

- (b) providing services or facilities designed to promote healthy living (whether by helping individuals to address behaviour that is detrimental to health or in any other way);
- (c) providing services or facilities for the prevention, diagnosis or treatment of illness;
- (d) providing financial incentives to encourage individuals to adopt healthier lifestyles;
- (e) providing assistance (including financial assistance) to help individuals to minimise any risks to health arising from their accommodation or environment;
- (f) providing or participating in the provision of training for persons working or seeking to work in the field of health improvement;
- (g) making available the services of any person or any facilities.⁶

Section 12(4) of the 2012 Act gives local authorities powers to make grants or lend money to organisations or individuals in order to improve public health; it is for the local authority to determine the appropriate terms of such grants or loans.

Public Health England and directly commissioned services

In addition to transferring local health improvement functions from primary care trusts (PCTs) to local authorities in 2013, Public Health England (PHE) was established as a directorate within the Department of Health. PHE has taken on responsibilities to oversee the local delivery of public health services and to deal with national issues such as flu pandemics and other population-wide health threats. The Health Protection Agency, an independent UK organisation set up in 2003 to protect the public from threats to their health from infectious diseases and environmental hazards, also became part of PHE on 1 April 2013.

The public health services that NHS England commissions directly, on behalf of PHE, for 2018/19 are:

- National immunisation programmes;
- National screening programmes;
- National cancer screening programmes;
- Sexual assault services;
- Child health information services;
- Public health services for adults and children in secure & detained settings in England.⁷

In October 2014 PHE published a strategic document setting out its priorities for the next five years. [From evidence into action: opportunities to protect and improve the nation's health](#) set out the following seven priorities using the evidence to determine where it could most effectively focus its efforts on securing improvements:

- tackling obesity particularly among children
- reducing smoking and stopping children starting

⁶ *Health and Social Care Act 2012*, section 12(3)

⁷ Department of Health and Social Care, [NHS public health functions agreement 2018-19](#), March 2018, Annex A

- reducing harmful drinking and alcohol-related hospital admissions
- ensuring every child has the best start in life
- reducing the risk of dementia, its incidence and prevalence in 65 to 75 year olds
- tackling the growth in antimicrobial resistance
- achieving a year-on-year decline in tuberculosis incidence

In April 2016, PHE published its following strategy document, [Strategic plan for the next four years: better outcomes by 2020](#).

Further reading

In March 2015 the Public Accounts Committee (PAC) published a report on PHE's grant to local authorities. The Report states that PHE has made a good start in its efforts to protect and improve public health.⁸ However, the PAC had a number of concerns about the slow progress in tackling health inequalities:

There are still unacceptable health inequalities across the country, for example healthy life expectancy for men ranges from 52.5 years to 70 years depending on where they live. These inequalities make PHE's support at a local level particularly important but we are concerned that PHE does not have strong enough ways of influencing local authorities to ensure progress against all of its top public health priorities. Finally, given how important it is to tackle the many wider causes of poor public health, PHE needs to influence departments more effectively and translate its own passion into action across Whitehall."⁹

In February 2014 the Health Committee published a report on [Public Health England](#) and in September 2016 it published [Public health post-2013](#).¹⁰ In the latter report, despite welcoming the transferral of public health responsibilities to local authorities, the Committee highlighted a number of concerns:

Cuts to public health and the services they deliver are a false economy as they not only add to the future costs of health and social care but risk widening health inequalities.

The new public health system is designed to be locally driven, and therefore a degree of variation between areas is to be expected. However, we are concerned that robust systems to address unacceptable variation are not yet in place. The current system of sector-led improvement needs to be more clearly linked to comparable, comprehensible and transparent information on local priorities and performance on public health. Changes to local government funding, especially the removal of ring-fencing of the public health grant, must be managed so as not to further disadvantage areas with high deprivation and poor health outcomes.

While strong local political leadership can bring enormous benefits for public health, there is also the potential for tension between

⁸ PAC, [Public Health England's grant to local authorities](#) (HC 893, 6 March 2015)

⁹ *Ibid*, summary

¹⁰ See also: Communities and Local Government Select Committee, [The role of local authorities in health issues](#), (HC 694, Eighth Report of Session 2012-13, March 2013).

political priorities and evidence-based decision making. Clearer standards should be introduced and monitored transparently to improve accountability and to make sure that services to underrepresented or politically unpopular groups are maintained at an appropriate level.

We also recommend that local authorities be given greater powers to directly improve the health of their local communities and reduce health inequalities by including health as a material consideration in planning and licensing. We commend the proposals for a tax on the manufacturers of sugary soft drinks and call for further bold and brave cross-Government action to be included in the childhood obesity strategy and life chances strategy.¹¹

The Health Committee also pointed out that the commissioning landscape can be complicated. The Committee highlighted that public health professionals can sometimes struggle to gather the necessary information and workforce required, and that efforts should be made to improve data sharing, workforce mobility and the regulation of specialists.¹²

The Government published its [Tailored Review of Public Health England](#) in April 2017. It found that PHE “has made good progress with integrating the staff, cultures, working practices and physical assets of the variety of organisations from which it was created, building an organisation that provides expert advice on all aspects on health protection and improvement.”¹³ The report made 11 recommendations to improve its operations.

1.3 Public health in Scotland

The Chief Medical Officer (a role within the Scottish Government Directorate for Health and Social Care) is the ‘national lead’ on public health in Scotland and is responsible for

- providing policy advice to Scottish Ministers on healthcare and public health
- leading medical and public health professionals to improve the mental and physical wellbeing of people in Scotland
- providing clinical advice on professional standards and guidelines
- investing in research, particularly related to the NHS
- encouraging young people to take up jobs in the medical and public health sector¹⁴

[NHS Health Scotland](#) also has duties to

- provide evidence of what works to reduce health inequalities

¹¹ [Public health post-2013](#), Health Select Committee, September 2016

¹² [Public health post-2013](#), Health Select Committee, September 2016

¹³ [Tailored Review of Public Health England](#), Department of Health, April 2017

¹⁴ [Chief Medical Officer \(Office\)](#), Scottish Government website, accessed 10 May 2018

- work across all sectors in Scotland to put this evidence into action
- support national and local policy makers to design and evaluate interventions that help build a fairer, healthier Scotland.¹⁵

However, the main responsibility for the planning and provision of public health services lies with the 13 regional NHS boards. Each one has a Public Health Department and a Director of Public Health who has a place on the board.¹⁶

In November 2014, the Scottish Government announced a review of public health systems in Scotland. This review was given the “remit to examine public health systems and functions and their contribution to improving population health and reducing (health) inequalities.”¹⁷ It recommended:

- a. Further work to review and rationalise organisational arrangements for public health in Scotland. This should explore greater use of national arrangements including for health protection.
- b. The development of a national public health strategy and clear priorities;
- c. Clarification and strengthening of the role of the Directors of Public Health(DsPH), individually and collectively;
- d. Supporting more coherent action and a stronger public health voice in Scotland;
- e. Achieving greater coordination of academic public health, prioritising the application of evidence to policy and practice, and responding to technological developments;
- f. An enhanced role for public health specialists within Community Planning Partnerships (CPPs) and Integrated Joint Boards (IJBs); and
- g. Planned development of the public health workforce and a structured approach to utilising the wider workforce.¹⁸

These recommendations have been integrated into the [Health and Social Care Delivery Plan](#) (December 2016) in which the Government aims to:

- create a clear set of national public health priorities for Scotland as a whole and streamline the currently cluttered public health landscape;
- develop and build on our sustained approach to addressing the key public health issues of alcohol and tobacco misuse and diet and obesity;
- drive forward a new approach to mental health that ensures support and treatment are mainstreamed across all

Community Planning Partnerships bring together communities and local public bodies in order to create plans for achieving better local outcomes.

Integrated Joint Boards are new bodies that have taken over health and social care services previously administered separately by local authorities and the NHS.

¹⁵ [About us](#), NHS Health Scotland, accessed 10 May 2018

¹⁶ [The National Health Service in Scotland](#), SPICe briefing, Scottish Parliament, December 2016

¹⁷ [2015 Review of Public Health in Scotland: Strengthening the Function and Refocussing Action for a Healthier Scotland](#), Scottish Government, February 2016

¹⁸ [Health and Social Care Delivery Plan](#), Scottish Government, December 2016

parts of the health service – and beyond – and is not simply the responsibility of specialist services, working within the framework of a new 10-year mental health strategy to be published in early 2017; and

- support a More Active Scotland¹⁹

Specific action points over the coming years are set out in the Health and Social Care Plan:

- In **2017**, we aim to: Set national public health priorities with SOLACE and COSLA²⁰, that will direct public health improvement across the whole of Scotland. This will establish the national consensus around public health direction that will inform local, regional and national action.
- By **2019**, we aim to: Support a new, single, national body to strengthen national leadership, visibility and critical mass to public health in Scotland. Such a body will have a powerful role in driving these national priorities and providing the evidence base to underpin immediate and future action.
- By **2020**, we aim to: Have set up local joint public health partnerships between local authorities, NHS Scotland and others to drive national public health priorities and adopt them to local contexts across the whole of Scotland. This will mainstream a joined-up approach to public health at a local level.²¹

The Scottish Government also states that it will adopt various new programmes and strategies to tackle smoking, obesity, alcohol and mental health, as well as promote a better diet for children and active living.²²

1.4 Public health in Wales

7 Local Health Boards (LHBs) plan and deliver health services in Wales. Each has a Director of Public Health. LHBs work alongside local authorities to plan public health programmes and services.²³

[Public Health Wales](#), one of three NHS Trusts in Wales, provides “advice, expertise and specialist services” all these organisations and the government.²⁴

The *Public Health (Wales) Act 2017* has legislated for a number of measure aiming to tackle public health issues. This includes:

- Placing a statutory duty on the Welsh Government to publish an obesity strategy
- Restricting smoking in outdoor care settings for children, school grounds, hospital grounds and public playgrounds. The aim is to avoid the normalisation of smoking

¹⁹ [Health and Social Care Delivery Plan](#), Scottish Government, December 2016

²⁰ SOLACE (Society of Local Authority Chief Executives and Senior Managers); COSLA (Convention of Scottish Local Authorities)

²¹ [Health and Social Care Delivery Plan](#), Scottish Government, December 2016

²² [Health and Social Care Delivery Plan](#), Scottish Government, December 2016

²³ [About Public Health Wales](#), NHS Wales website, accessed 10 May 2018

²⁴ [About Public Health Wales](#), NHS Wales website, accessed 10 May 2018

- Establishing a national register of retailers of tobacco and nicotine products in order to better enforce current legislation
- Giving Welsh ministers the power to add offences which can contribute to a Restricted Premises Order (preventing a person or business for selling tobacco for up to one year)
- Making it illegal to pass tobacco or nicotine products to unaccompanied people under 18 years old: this aims to stop children buying such products remotely
- Introducing a licensing scheme for providers of acupuncture, body piercing, electrolysis, and tattooing
- Prohibiting 'intimidate piercings' for under-18 year olds
- Requiring the Welsh Government to make regulations for mandatory health impact assessments: assessments to be carried out by public bodies during decision-making processes
- Requiring providers of NHS pharmaceutical or dispensing services to register with a local Health Board, which in turn must prepare 'pharmaceutical needs assessments' to improve delivery of pharmaceutical services.
- Requiring each local authority to publish a local toilets strategy for its area, although there is no general duty to provide or maintain such toilets.

For more information, the National Assembly of Wales Research Service has produced a [Research briefing on the Public Health \(Wales\) Act 2017](#).

1.5 Public health in Northern Ireland

The Health and Social Care Board (through its five Local Commissioning Groups) and the Public Health Agency (PHA), are jointly responsible for commissioning public health services in Northern Ireland.²⁵ However it is the PHA which is generally responsible for improving public health, developing services, informing policy decisions and improving inter-sectoral working.²⁶

The Committee for Health, Social Services & Public Safety published a [Review of Health Inequalities](#) in January 2013 to which the [Government responded](#) in June that year. This Committee report helped to shape the Government's new public health strategy for 2013-2023, [Making Life Better](#), released in June 2014. This is split into six themes:

- 1 Giving Every Child the Best Start
- 2 Equipped Throughout Life
- 3 Empowering Healthy Living
- 4 Creating the Conditions
- 5 Empowering Communities
- 6 Developing Collaboration

These six themes are explained further in Making Life Better:

²⁵ [Health and Social Care structure](#), Health and Social Care Online, accessed 10 May 2018

²⁶ [About us](#), Public Health Agency, accessed 10 May 2018

“Giving Every Child the Best Start” and “Equipped Throughout Life”, take account of particular needs across the life course and cover childhood and adulthood, with emphasis given to children and young people, and to supporting individuals’ transitions into and through adulthood and older age. “Empowering Healthy Living” addresses support for individual behaviours and choices, including embedding prevention across Health and Social Care services.

“Creating the Conditions” and “Empowering Communities” address the wider structural, economic, environmental and social conditions impacting on health at population level, and within local communities. These will align with key government strategies such as those to develop the economy, tackle poverty and promote community relations.

“Developing Collaboration” considers strengthening collaboration for health and wellbeing at regional and local levels. This theme identifies three areas of work (in relation to food, space/environments and places, and social inclusion) around which a number of partners have been developing collaborative approaches. These areas have been recognised as being of importance in improving health and reducing health inequalities. They have the potential to bring together communities and relevant organisations at local level, supported where necessary at regional level.²⁷

A [First Progress Report](#) on the public health strategy for 2014-15 has since been published.

Further reading

Official publications – UK/England

[Fair Society, Healthy Lives](#), Marmot Review, February 2010

Public Health England publishes a wide range of data showing variation in the health of the population, as well as wider determinants of health, across the country. You can browse this through PHE’s [data portal](#).

As well as its [blog](#), PHE also publishes a great deal of policy papers and assessments. Some prominent, recent examples include:

- [Improving health and care through the home: Memorandum of Understanding](#), 19 March 2018
- [Sugar Reduction: Achieving the 20%](#), 27 March 2018
- [Salt Reduction Targets for 2017](#), 27 March 2018
- [NHS Screening Programmes in England](#), November 2017
- Collection of papers on [antimicrobial resistance](#), last updated November 2017
- [Child weight management services: systematic review](#), 3 October 2017
- [Improving health and wellbeing through our national parks](#), 8 September 2017
- [Helping older people maintain a healthy diet: A review of what works](#), 2 February 2017

[NHS Health Scotland](#) also publishes material on different public health issues.

²⁷ [Making Life Better: A Whole System Strategic Framework for Public Health](#), Department of Health, Northern Ireland Executive, June 2014

- [Childhood obesity plan: PHE's role in implementation](#), 29 September 2016
- [Helping people live well for longer](#), 28 April 2014

PHE also publishes a wide range of [research and analysis](#) on public health issues.

The Department of Health and Social Care also publishes [policy papers and reports on public health issues](#). Some major recent documents include:

- [Chief Medical Officer annual report 2017: health impacts of all pollution – what do we know?](#) 2 March 2018
- [Towards a smoke-free generation: tobacco control plan for England](#), 18 July 2017
- [Annual report of the Chief Medical Officer 2016: Generation Genome](#), 7 July 2017
- [Annual Report of the Chief Medical Officer 2015: Baby Boomers: Fit for the Future](#), 8 December 2016
- [Childhood obesity: a plan for action](#), first published August 2016
- [Annual Report of the Chief Medical Officer, 2014 - The Health of the 51%: Women](#), 11 December 2015
- [Improving children and young people's health](#), 30 April 2014
- [Annual Report of the Chief Medical Officer: Surveillance Volume, 2012: On the State of the Public's Health](#), 27 March 2014
- [Chief Medical Officer annual report 2012: children and young people's health](#), 24 October 2013

UK Parliamentary

The Commons and Lords Library have a number of relevant publications:

- [Obesity: Children and Young People](#), Lords Library, April 2018
- [Obesity Statistics](#), Commons Library, March 2018
- [Obesity: Children and Young People](#), Lords Library debate pack, February 2018
- [The effect of junk food advertising on obesity in children](#), Commons Library debate pack, January 2018
- [Tobacco control policy overview](#), Commons Library, 8 November 2017
- [Reducing health inequality](#), Commons Library debate pack, November 2016
- [Smoking Related Diseases: Government Action](#), Lords Library debate pack, August 2016
- [Air Quality and Health in the UK](#), Lords Library, November 2015
- [Preventing Diabetes](#), Parliamentary Office of Science and Technology, July 2012

Health Select Committee launched a [Childhood obesity inquiry](#) in March 2018. The year previously, the Committee published its final report on [Childhood obesity: follow-up](#).

[Housing for older people inquiry](#), Housing, Communities and Local Government Committee, 9 February 2018 (part 3 looks at links to health).

The Health Select Committee also published a report on [The impact of physical activity and diet on health](#) in March 2015.

[Were massive reforms necessary to save the NHS](#), All Party Primary care and Public Health Group, January 2012.

Academic, third sector and other organisations

The [Royal Society for Public Health](#) publishes material on a number of public health concerns. [NICE](#) provides a useful search tool for scientific reports, which includes public health related material.

[A matter of justice: Local government's role in tackling health inequalities](#), Local Government Association, February 2018

[Time for the UK to commit to tackling child obesity](#), British Medical Journal, 2017

[Priorities for tackling the obesity crisis in England Expert agreement on what needs to be done](#), Food Foundation, October 2016

[Tackling poor oral health in children: Local government's public health role](#), Local Government Association, April 2016

[Building the foundations: Tackling obesity through planning and development](#), Local Government Association, February 2016

[Tackling the UK's childhood obesity epidemic](#), Royal Society for Public Health, November 2015

Roger Williams et al., [Addressing liver disease in the UK: a blueprint for attaining excellence in health care and reducing premature mortality from lifestyle issues of excess consumption of alcohol, obesity, and viral hepatitis](#), *Lancet*, Vol 384 November 29, 2014

[Improving the public's health: A resource for local authorities](#), King's Fund, 2013

Peter Scarborough et al., [The economic burden of ill health due to diet, physical inactivity, smoking, alcohol and obesity in the UK: an update to 2006–07 NHS costs](#), *Journal of Public Health*, Volume 33, Issue 4, 1 December 2011, Pages 527–535

S Allender et al., [The burden of smoking-related ill health in the UK](#), *Tobacco Control*, 2009;18:262–267

S. Allender and M. Rayner, [The burden of overweight and obesity-related ill health in the UK](#), *The International Association for the Study of Obesity. obesity reviews* 8, 467–473, 2007

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