



# Council

## Royal College of Nursing

### Revised statement on *Public Health and Health Promotion*

#### Introduction

A key strand in public health is the lifestyle choices made by individuals. The impact of choices made by individuals may extend beyond themselves to affect their children, their families, their employers and the wider community that they come into contact with. Individual choices will, on a collective basis, have ramifications for society as a whole.

The RCN takes a balanced approach between individual, societal/cultural, legal and regulatory policy measures to be an effective voice for the profession in the delicate interplay of rights and responsibilities of individuals, businesses, and governments, at both the national and international level.

#### Individual Responsibilities

The RCN agrees that nurses and nursing must support the population to make healthier choices. Illness and disease prevention is underpinned by the principle that individuals should be empowered with accurate information to help them understand the impact that life style has on their health. More can also be done to improve the lived environment so that people find it easier to make healthier choices, however use of the 'nudge'<sup>1</sup> approach alone, in the absence of regulation, is likely to have limited success.

#### Business Responsibilities

The RCN supports the principle of engaging with business to behave in a socially responsible way and recognise that voluntary commitments to living better can work, we believe that sometimes the interests of business and the interests of population health simply do not align. People often need support to make better choices about how they live, and the RCN has suggested that a firm approach should be taken with business, with the 'stick' of regulation being used where appropriate.

#### Government Responsibilities

The RCN believes that in some circumstances action from national government is the most appropriate way in which to protect and promote public health. There are numerous examples of where this has been vital to making societal changes, for instance mandating the inclusion of accurate information and appropriate advice on

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<sup>1</sup> See: [https://en.wikipedia.org/wiki/Nudge\\_theory](https://en.wikipedia.org/wiki/Nudge_theory)

## Agenda Item 6.1

the labelling of tobacco, alcohol and food products; drawing up a clear transport policy to reduce air and noise pollution and encourage the adoption of active forms of transport, such as cycling and walking.

There are also areas where government has a role in supporting societal change through debate and discussion, such as in making breast feeding friendly spaces the norm in public places, and in increasing provision of and access to green spaces, as a means to benefit physical and mental health and wellbeing.

This role is obviously one that is made more complicated by the nature of modern government and governance, for instance by the devolved nature of the UK state, and our relations with international bodies; and of contemporary health and care issues that span the globe, such as those posed by climate change, infectious diseases, and political instability.

### **RCN responsibilities**

As an organisation we should ensure that the actions we take are informed by our mission and our values.

### **Role of nurses and nursing**

Regardless of the environments in which they work, all members of the nursing family have a part to play in improving the health of their local populace. In every context and at every level, nursing staff carry out public health activities.

They may work in public health departments as a public health consultant or Directors of Public Health, they may have a public health clinical role, such as specialist alcohol nurse, sexual health, occupational health or travel health nurse or health visitor; or they may deliver public health messages as part of everyday care provision or at 'teachable moments' (when patients are more open to public health messages in light of their present health condition), or in following the 'Make Every Contact Count<sup>2</sup>' mantra.

Nurses need to build supportive relationships with patients and to make every contact count. They also need the skills to have the difficult conversation with patients about their lifestyle, and to use their professional judgement as to which clinical situations are appropriate for these conversations.

Nurses often work to prevent ill health by addressing lifestyle choices in a fashion which make people feel supported to make healthier choices. However, if an individual chooses not to change unhealthy behaviours then the ethos of the NHS ensures that they will be treated in a non-judgemental way for any illness that ensues.

### **Importance of prevention and health promotion**

The UK is dealing with the impact of the global economic recession and a reduction in public spending. It is important that health promotion is now a high priority and that we act decisively to relieve the burden of unhealthy lifestyles on our health service and society.

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<sup>2</sup> See: <http://www.makingeverycontactcount.co.uk/>

## Agenda Item 6.1

There is a cost benefit to early interventions; however, tight budgets often mean activity is focussed on short term areas of acute need rather than prevention work which would be of greater benefit in the long term. The RCN has called for more emphasis on 'up-stream' primary prevention activity to be embedded within the public health and health system.

The King's Fund notes that "primary prevention is an excellent use of resources when compared with many treatment and curative interventions. Of more than 250 studies on prevention published in 2008, almost half showed a cost of under £6,400 per quality-adjusted life year (QALY) and almost 80 per cent cost less than £30,000 per QALY, the cut-off used by the National Institute for Health and Clinical Excellence (NICE) for cost-effectiveness (van Gils *et al* 2010)."<sup>3</sup>

### Specific issues of concern

#### ***Tobacco and Alcohol***

We have regarded tobacco as a special case because of the immediate health harm to the smoker and others around them with no additional health benefits. We would be entirely unwilling to engage with the tobacco industry and have encouraged tighter control of tobacco products to reduce the prevalence of smokers wherever possible.

For example, in an announcement to launch the RCN's membership of the Plain Packs Protect Campaign, Dr Peter Carter said:

"The RCN has consistently campaigned for initiatives to reduce the number of people who smoke. However, smoking remains the major cause of premature death and disease killing over 100,000 people each year. Crucially, we now need more robust ideas to stop young people smoking in the first place, such as clamping down on the use of tobacco packaging as advertising. This is why we support the campaign for plain standardised packaging."<sup>4</sup>

However, when considering alcohol, moderate consumption is generally considered to be a socially acceptable part of British culture. The RCN alcohol policy has therefore been focussed on 'alcohol misuse' and 'excessive consumption' and has called for the adoption of harm reduction measures and greater awareness of its effects on health, not the elimination of alcohol products.<sup>5</sup>

This is best illustrated by a Guardian comment piece by Dr Peter Carter in 2010:

"There needs to be a *cultural shift towards safer drinking*, especially among younger people, to help the NHS and to improve the health of the nation."<sup>6</sup>

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<sup>3</sup> See:

[http://www.kingsfund.org.uk/current\\_projects/gp\\_commissioning/ten\\_priorities\\_for\\_commissioners/primary\\_prevention.html](http://www.kingsfund.org.uk/current_projects/gp_commissioning/ten_priorities_for_commissioners/primary_prevention.html)

<sup>4</sup> See: [http://www.rcn.org.uk/development/communities/rcn\\_forum\\_communities/public\\_health](http://www.rcn.org.uk/development/communities/rcn_forum_communities/public_health)

<sup>5</sup> RCN Alcohol: policies to reduce alcohol-related harm in England, 2012

<sup>6</sup> See: <http://www.guardian.co.uk/commentisfree/2010/jan/08/alcohol-abuse-nhs-resources>

# Agenda Item 6.1

## ***Climate Change and the need for sustainability in health systems***

*(Text adapted from 'Health Professionals' Alliance to Combat Climate Change' Business plan)*

Climate change threatens to undermine the foundations of public health and wellbeing, both in the United Kingdom and globally. Left unabated, it will exacerbate existing national health challenges, place undue financial strain on the NHS, and worsen inequity within and between countries.

Climate change and its health impacts are already being experienced around the globe, and will prove catastrophic if left unabated. They include an increase in frequency and severity of extreme weather events such as flood, drought, extreme storms and heatwave; the spread of new vector borne diseases such as malaria and dengue; malnutrition and famine resulting from decreased agricultural productivity; rising sea levels and subsequent population displacement; and an exacerbation of poverty and social unrest. These health impacts have been summarized and studied extensively by the IPCC's second working group<sup>7</sup>, and by the 2015 Lancet Commission on Health and Climate Change<sup>8</sup>.

The Intergovernmental Panel on Climate Change (IPCC) noted that the “warming of the climate system is unequivocal”, and that “man’s influence on the climate is clear”. These climatic changes place further pressures on fragile ecosystems, already collapsing under pressure of a growing world population, and its increased demand on resources. Margaret Chan, the WHO Director General, has described climate change “the defining health challenge of our time”.

Many of the drivers of climate change, fossil fuels, over-consumption, and poorly designed cities, also directly cause poor health, through air pollution, unhealthy diets, and physical inactivity. By responding to climate change, we can simultaneously address these health challenges, meaning that climate change mitigation policies also offer cost-effective and sensible public health interventions. Similarly, health system strengthening and improved community health is one of the most effective adaptation strategies to minimise the harm caused by climate change.

As an organisation we will be working alongside other health organisations to support this proactive approach to the challenge climate change presents.

### ***Social Determinants of Health***

The RCN has also commented on a wider range of contributory social factors (also referred to as social determinants of health<sup>9</sup>, and referred to as such in the first Marmot report<sup>10</sup>) that influence directly or indirectly the health of the population.

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<sup>7</sup> See: <https://www.ipcc-wg2.gov/index.html>

<sup>8</sup> See: <http://climatehealthcommission.org/the-report/>

<sup>9</sup> See: [http://www.who.int/social\\_determinants/en/](http://www.who.int/social_determinants/en/)

<sup>10</sup> See: <https://www.instituteofhealthequity.org/>

## Agenda Item 6.1

In so doing we have high-lighted a number of key political issues: social and economic inequality and the importance of securing a good standard of living for all<sup>11</sup>; poverty and the deleterious effects of welfare benefits changes, including cuts to housing benefit and incapacity benefit; the importance of social capital and resilient communities; and the connection between poor housing, fuel poverty, and poor health.

Whilst these may be beyond the direct remit of the nursing role, all members of the nursing family will see the evidence and deal with the consequences of poor public health arising from these contributory social factors.

Nursing presence at every stage of the life course means they are engaged across the spectrum of public health interventions. Nurses are able to view individuals' needs and circumstances holistically, to understand the full package of support and care required, often by working closely with other agencies outside the NHS, to help address underlying causes of illness.

Public health is therefore absolutely the core business of all nurses, but these duties are not performed in a vacuum. Nurses reach deep into the heart of families and communities. They are confronted daily with the consequences of social conditions on the health and well-being of the communities they are caring for. Because nurses witness the impact of social determinants on the health of both patients they are providing care to and the wider population, they have a clear stake in the direct and underlying causes of bad health. For all these reasons the RCN is keen to work with others to reduce the occurrence of avoidable poor health.

**ENDS**

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<sup>11</sup> See: [http://www.rcn.org.uk/\\_data/assets/pdf\\_file/0007/438838/01.12\\_Health\\_inequalities\\_and\\_the\\_social\\_determinants\\_of\\_health.pdf](http://www.rcn.org.uk/_data/assets/pdf_file/0007/438838/01.12_Health_inequalities_and_the_social_determinants_of_health.pdf)