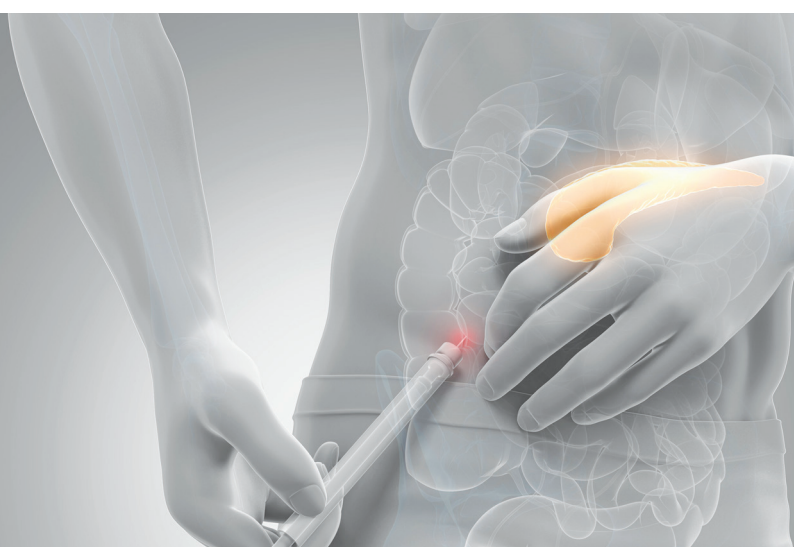


# Long-term Conditions in Adults at a Glance

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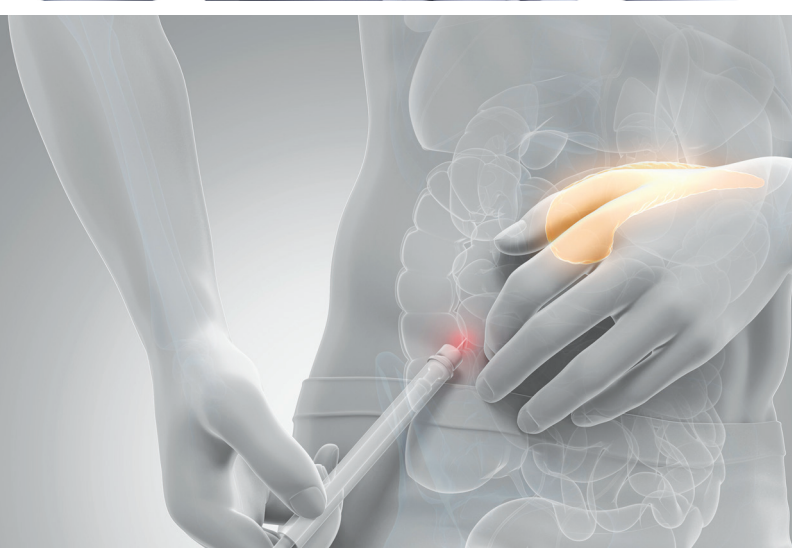
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# Long-term Conditions in Adults at a Glance





# Long-term Conditions in Adults at a Glance

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# Preface

In the 70 years since the founding of the NHS, life expectancy has increased by around 13 years. But different types of diseases are becoming more common. More people are living with cancer or dementia largely due to increases in life expectancy and falls in the rate of premature death. With advances in prevention and medical care the UK mortality rate from heart and circulatory diseases has declined by more than three quarters in the last 40 years. But cardiovascular disease remains the biggest cause of premature mortality and the rate of improvement has slowed. Long-term conditions or chronic diseases are conditions for which there is currently no cure, and which are managed with drugs and other treatment, for example: diabetes mellitus, chronic obstructive pulmonary disease, arthritis, and hypertension. Longer-term health conditions also make an increasing contribution to the overall burden of disease. Mental health, respiratory and musculoskeletal conditions are responsible for a substantial amount of poor health and place a substantial burden on the NHS and other care services. The latest Global Burden of Disease study shows that the top five causes of early death for the people of England are: heart disease and stroke, cancer, respiratory conditions, dementias, and self-harm. It also reveals that the slower improvement since 2010 in years-of-life-lost is mainly driven by distinct condition-specific trends, predominantly in cardiovascular diseases and some cancers.

There are currently 15.4 million people in England with an LTC. Due to an ageing population, it is estimated that by 2025 there will be 42% more people in England aged 65 or over. This will mean that the number of people with at least one LTC will rise by 3–18 million. People with LTCs account for a significant and growing proportion of health and social care resources. The Department of Health's best estimate is that the treatment and

care of people with LTCs account for 70% of the total health and social care spend in England, or almost £7 in every £10 spent. Social care expenditure, too, is focused on those with LTCs and will be put under pressure by the ageing population. By 2022 the proportion of those aged 65 and over will increase by 37% to 10.8 million; the number of people aged 65 and over with some disability will increase by 40% to 3.3 million; the number of disabled older people receiving informal care (in households) will rise by 39% to 2.4 million; the number of people in residential care homes will increase by 40% to 280 000; and the number of people in nursing homes will increase by 42% to 170 000. This need for social care will mean that by 2022 public expenditure on long-term care will rise by 94% to £15.9 billion. The total long-term care expenditure is forecast to rise by 29% to £26.4 billion. This is equivalent to a rise from 1.4% to 1.8% of GDP.

Health-care professionals are in a key position to support patients with long-term conditions attain a better quality of life through purposeful interventions that aim to minimise symptoms, reduce the intensity and frequency of acute exacerbations of the disease and enhance psycho-social well-being. Several public consultations such as 'Independence, Well-being and Choice' (GOV.UK) and 'Your Health, Your Care, Your Say' (NHS) have provided consistent messages from people with long-term conditions about what is important to them. Overall, people say they want services that support them to remain as independent and healthy as possible. They want increased choice, with information to help them make choices and to understand and manage their conditions better. They want far more services delivered safely and effectively in the community or at home, with more seamless, proactive, and integrated services that are personalised to them and their needs.

# Long-term conditions: sociological factors



## Part 1

### Chapters

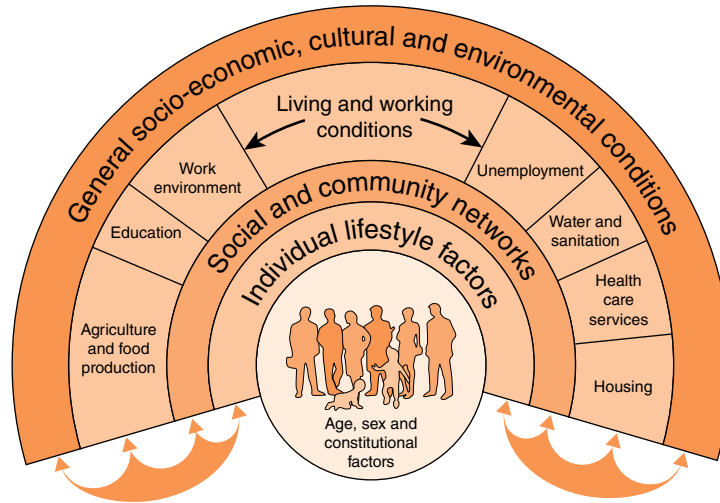
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# 1

# Determinants of health

Daniela Blumlein and Ian Griffiths

**Figure 1.1** The Rainbow model. Source: Dahlgren and Whitehead 1991.



**Table 1.1** Examples of Health Determinants

Category	Examples of Health Determinants
Biological Factors	Age, sex, inherited illnesses, genetics, co-morbidities, old age
Personal Lifestyle Factors	Smoking, obesity, alcohol consumption, substance abuse, level of physical activity
Social and Community Networks	Family connections, circle of friends, social isolation, loneliness
Living and Working Conditions	Employment status, level of education, access to clean water, sanitation, healthcare services, quality of housing, exposure to pollution, food production methods
Socioeconomic, Cultural, and Environmental Conditions	Conflicts and wars, droughts, floods, climate crisis, crime, economic issues like recessions and inflation, food security, pandemics

## Determinants of Health

This chapter explores the intricate concept of health determinants, endeavouring to establish an understanding of how various influences can impact and shape an individual's health trajectory throughout their lifespan. The concept of health extends far beyond the absence of illness; it is a state of complete physical, mental, and social well-being. Health is a resource for everyday life, not merely the objective of living, which underscores the importance of health determinants.

When we discuss an individual's well-being and health, it necessitates more than the absence of a specific illness or health disorder, whether physical or mental. The holistic health and well-being of a person are influenced by an assortment of known factors. These elements can generate either positive or negative effects on a person's physical or mental health and are generally recognised as 'determinants of health'.

Among the seminal models in understanding these determinants is the Rainbow model (Figure 1.1). Despite its years of inception, this model remains to be a cornerstone in health discussions and is widely applied today. It offers a comprehensive framework outlining how external and internal factors, along with various root causes, can significantly impact a person's overall health and well-being.

## The Impact of Determinants of Health

Health inequalities persist as a global challenge, making their presence felt in almost every country around the world. The living conditions of an individual, influenced by an array of societal factors, significantly contribute to these disparities, directly and indirectly affecting their health outcomes.

Researchers and health professionals have identified various determinants of health (Table 1.1), with the following being some of the most pivotal:

- 1 Biological factors:** Age, sex, and constitutional factors such as inherited illnesses and genetics play a crucial role. Co-morbidities or the inevitability of old age can significantly influence health outcomes.
- 2 Personal lifestyle factors:** Health is greatly influenced by personal behaviours and habits. Factors such as smoking, obesity, alcohol consumption, substance abuse, or the level of physical activity can determine a person's health trajectory.
- 3 Social and community networks:** The importance of social and community connections is paramount. A strong support system in the form of family, friends or a social circle can contribute positively to health outcomes, whereas loneliness and social isolation can have the opposite effect.

**4 Living and working conditions:** A person's living and working conditions are significant health determinants. They include elements such as employment status, level of education, access to clean water, sanitation and healthcare services, housing quality, exposure to pollution, and food production methods.

**5 Socioeconomic, cultural, and environmental conditions:** Wider societal issues, including conflicts and wars, droughts, floods, climate crisis, crime, economic turbulence such as recessions and inflation, food security, and pandemics, also bear heavily on health.

The Rainbow model shifts the focus onto these wider aspects that may influence an individual's health. It moves beyond a strictly medicalised model, which often centres on treating an illness without addressing its wider causes or potential preventative measures. This broader perspective is crucial as it allows policy makers and healthcare professionals to collaborate closely with other professionals, developing strategies that provide a structured pathway to addressing each of the determinants of health.

For instance, if substandard housing conditions emerge as a significant issue, a broad range of professionals may be called upon to address the problem. This multidisciplinary team might involve architects, housing officers, healthcare professionals, police forces, environmental services, and community representatives.

Another way to consider health determinants is through a comparison of individuals living in starkly contrasting environments. Consider a person residing in a war-torn country, confronted with the daily realities of violence, fear, and famine, against someone living in a peaceful country, with ready access to a variety of foods and high-quality healthcare services. The overall well-being of these two individuals would be remarkably different, largely influenced by the determinants of health.

The task of addressing these health inequalities and ensuring equal access to healthcare services is paramount and complex. Policy makers shoulder a substantial responsibility to legislate for a more equitable society. In the UK, attempts have been made towards this through the implementation of the Care Act (Department of Health, 2014) and the NHS 10-Year Long Term Plan (NHS, 2018). These measures aim to enhance access to services and support individuals in maintaining good health throughout their lifespan. Ensuring these services are provided at every life stage, from prenatal to end-of-life care, is crucial.

A comprehensive understanding of the determinants of health is instrumental in forging policies and strategies aimed at improving population health and reducing health inequalities. By exploring the breadth and depth of these determinants, we open avenues for intervention, prevention, and health promotion, ultimately empowering individuals, and communities to achieve optimal health and well-being.