

# Health Sector Collaboration to Maximise Impact on Reducing Health Inequalities

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## Context and Approach:

Health inequalities are worsening in Wales. Healthcare is one determinant of health, largely through primary and community care. However, the NHS currently does not maximise its potential through policy, resource allocation, as anchor institutions or in planning. Wales does not have a Health Inequalities Strategy.

## Progress to date:

### Research:

- Qualitative study underway, with ethical approval from Cardiff University. *How can the health sector collaborate to maximise its impact on reducing health inequalities? the perceptions of key stakeholders.*
- Co-author on a paper published in October 2024 "Exploring the equity of distribution of general medical services funding allocations in Wales: a time-series analysis | BJGP Open" from the Inverse Care Law Study Group. This resulted in several of the authors, including myself, being invited to meet with the Cabinet Secretary for Health to discuss the Inverse Care Law in January 2025.
- Co-author "*We are all in the same boat ... but some of us...have got more holes in their boat*". *GPs at the Deep End in Wales: a qualitative interview study of GPs' and primary care staff's views of Deep End Cymru* accepted for publication April 2025.

### Avoidable deaths: the task for the NHS



### Leadership:

- As Public Health Lead for Deep End Wales, I have been part of the leadership team that successfully launched and established the network in 2022 and gained further funding from Welsh Government to continue the program into 2025. This role has enabled me to engage with key decision-makers. I have gained insight into the policy environment in Wales, and the influences that are changing it.
- Member of the RCGP Health Equity Special Interest Group, bringing perspectives from Wales to the rest of the UK.

### Education/teaching:

Teaching sessions on health inequalities for Swansea and Cardiff University Medical students.

## Future Activity:

- Completing the qualitative research study and disseminating the conclusions widely.
- Series of informal publications/ blogs on identified topics, for example:
  - What makes us flourish?
  - Avoidable mortality: who dies too young?
  - The shift to prevention: why this means very different things, Why waiting lists and times are unfair
  - Why Carr Hill formula needs urgent action.
- Setting up a community of practice for health workers for health inequalities action in Wales.

## Reflections:

- I have learned that this is even more complex than I knew. The conversation about health inequalities has changed, from a narrative for the last decades which focussed on socioeconomic determinants to a narrative about protected characteristics since the pandemic. This is very necessary but has meant a decreased actions to mitigate the impact of poverty and deprivation on health in Wales.
- Carrying out research is very challenging when there is no protected time (all in my own time).
- I am even more convinced that Wales needs a Health Inequalities strategy to ensure a health equity lens on all business as usual, and a proportionate universalist approach to all new intuitive/ policy/guidance/resource allocation.