

HEALTH ACTION RESEARCH GROUP

because prevention is better than cure



ANNUAL REVIEW 2023-2024

Our vision

A country where people live longer, healthier lives (instead of the nation's health often now being a postcode lottery) – achieved through health policies which:

- Recognise that prevention is better than cure
- Are evidence-based rather than driven by ideology or lobbying
- Give priority to tackling deprivation, as the single biggest preventable risk factor for poor physical and mental health

Our mission

As an independent health think tank we aim to encourage more preventative, evidence-based policies and approaches – to tackle the increasing mental and physical health issues the UK is facing.

Our approach

- To identify the root causes of health issues and therefore where action is likely to prove most effective.
- To find examples of action that has proved successful in tackling the issues, drawing on lessons learned from around the world.
- To share our findings as widely as possible with opinion formers, to help encourage the changes needed here in the UK.
- To work in partnership with other organisations concerned to reduce health inequalities and strengthen the case for change.

Why this matters

Living in a less affluent area shouldn't mean you're likely to die younger and spend more years in poor mental and physical health. Whatever your background, you should have a reasonable chance of living a long and healthy life.

Recognising that prevention is better than cure is key to achieving this.

This will also free up potential, with more people able to contribute positively, more actively, for longer.

Who we are

We're a health think tank, launched in 2015 and recognised as a charity for tax purposes by HMRC, with expert volunteers from a range of backgrounds, in particular health, education and medical research.

Our Long Term Priorities

More focus on child health – because what happens to us in the early years of life from conception onwards can influence our health for years to come (including reviewing current approaches to protecting children and young people's mental health, to identify which approaches are most productive).

Greater support for those at risk – to avoid health inequalities being carried forward from one generation to another.

A true National HEALTH Service, which gives higher priority to preventing people from falling ill, not simply treating them once they fall ill.

Make healthy choices the easy choices for people – making healthier food and drink more available and affordable, increasing opportunities for mental and physical exercise, encouraging active communities, and continued initiatives to make it easier to stop smoking and limit alcohol consumption.

What we do



Research the root causes of health issues, to identify where action is likely to prove most effective



Find ‘what works’ - action that has proved successful in tackling these issues, including examples from other countries that can be adopted or adapted in the UK



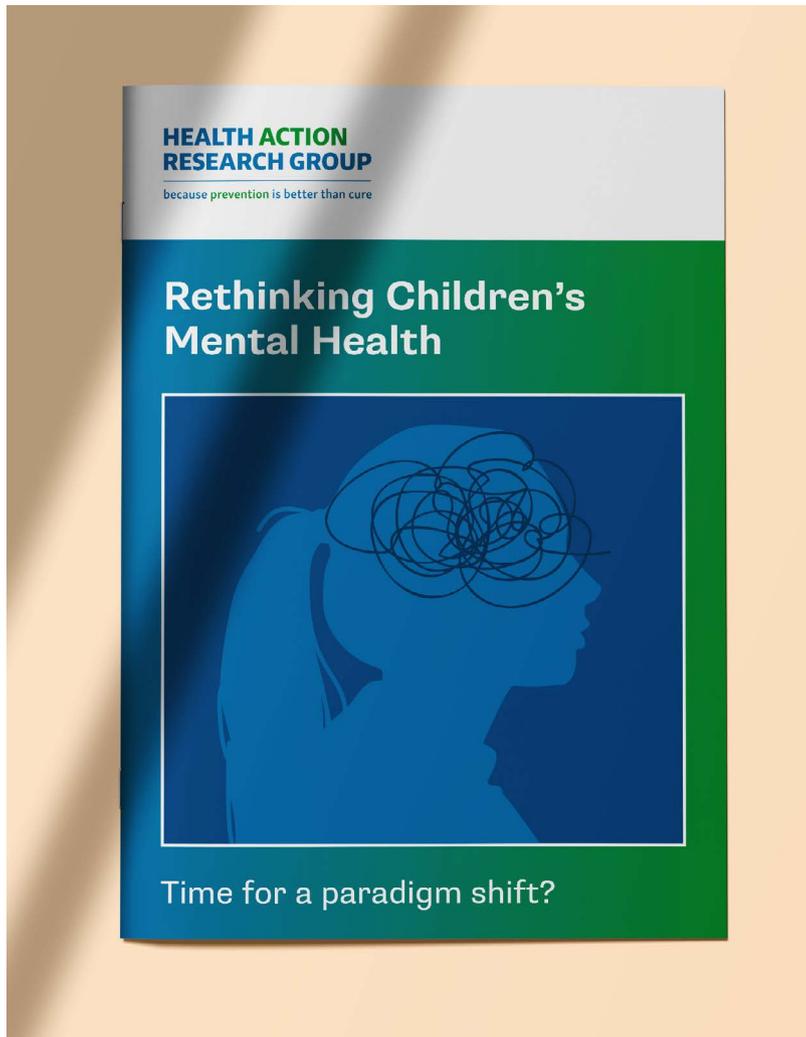
Share our findings, to encourage a more preventative approach to reducing health risks



Work in partnership with like-minded organisations seeking to reduce health inequalities and strengthen the case for change

Rethinking Children's Mental Health

Our new report, *Rethinking Children's Mental; Time for a paradigm shift*, suggests it is time to question the prevailing narrative that there is a children and young people's mental health crisis in the UK - and to rethink how best to protect children's mental health.



The report recognises the seriousness of diagnosed mental health conditions and the need to prioritise support for those in greatest need. However, it distinguishes between these serious clinically diagnosed mental health conditions and more widespread examples of self-reported emotional distress. These feelings of distress are real for those experiencing them, who will often benefit from support from family, friends and pastoral staff. However, they are typically what the NHS describes as the normal transient negative feelings we may all experience from time to time. Medical diagnosis is only required where these negative feelings become abnormal in their duration and effect on daily life. The report's findings included:

Serious clinically diagnosed mental health conditions

- Prevalence rates here remain relatively low.
- Deprivation is the biggest preventable risk factor for serious mental ill health - meaning the current focus on medical treatment may help manage symptoms but doesn't address a root cause.
- LGBTQ+ young people are at increased risk.
- Social media has compounded risks, including through 24/7 cyber bullying and material encouraging eating disorders and self-harm.

To tackle the underlying causes of serious mental ill-health, we therefore need to significantly reduce deprivation; stop the harassment of LGBTQ+ pupils; and improve online safety - including helping young people manage their time online, rather than being managed (and damaged) by it.

Rethinking Children's Mental Health

Emotional Distress

- There has been an unhelpful conflation of clinically diagnosed mental health conditions and everyday worries, creating an anxiogenic environment - with potentially harmful nocebo effects.
- Over-protective parents and schools have, with the best of intentions, reduced opportunities to develop resilience, leaving children and young people more vulnerable.
- Social media is increasingly romanticising mental health conditions, leading some young people to claim they have a mental health condition even if they haven't.

To help young people manage everyday worries we therefore need to help them reframe how they perceive negative feelings and emotions (to help them recognise what is normal and what isn't); encourage autonomy-supporting parenting and schooling, to enhance resilience; and view mental health conditions realistically (neither stigmatising nor romanticising).

Protecting Children's Mental Health

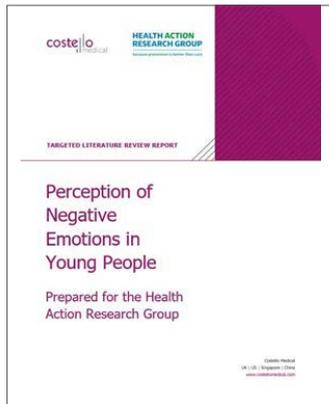
What research tells us helps protect children's mental health often has no explicit mental health connection, leading to its value potentially being overlooked. Examples include:

- Active Play (which research suggests can reduce stress, anxiety and depression).
- A Healthy Diet (avoiding ultra-processed food, to reduce the risk of depression).
- Physical Activity (reducing the risk of depression, anxiety and psychological distress).
- The Creative and Performing Arts (providing potentially therapeutic activity).
- Being a Guide or Scout (which longitudinal research indicates is associated with above-average mental health more than thirty years later).

Our findings suggest the need to seriously rethink how best to protect children's mental health.



How Young People Perceive Negative Emotions



A leading mental health charity has stated, ‘Mental health problems range from the worries we all experience as part of everyday life to serious long-term conditions.’ Through examples like this, young people have increasingly been led to believe that normal transient negative feelings and emotions, such as everyday worries, are mental health problems.

We have become concerned that this could have a number of negative consequences, from exaggerating the scale of mental health problems young people are facing, to a potentially harmful nocebo effect (placebo’s ‘evil twin’) resulting from this pathologizing of normal feelings and emotions.

To help us explore this further, Costello Medical kindly undertook a literature review for us, on a pro bono basis, reviewing published research on young people’s perceptions of negative emotions. The review identified that this was a significantly under-researched topic in the UK. However, research had been undertaken in a number of other developed countries, suggesting potential implications for young people’s mental health.



Paying excessive attention to negative emotions may be harmful to mental health, with multiple studies supporting that young people who scored high on measures of emotional attention had greater concurrent symptoms of depression or anxiety.

By looking for or focusing on negative emotional states, young people may ruminate, catastrophise and become mentally distressed, hindering the use of adaptive coping techniques. Young people with a negative inferential style in particular were consistently shown to be at higher risk of having symptoms of, or later developing, depression and other mental health disorders, especially while experiencing stressful life events or having poor emotional clarity.

Together, this evidence supports the nocebo hypothesis in young people, that negative perceptions of negative emotions or stressful life events and situations may put young people at higher risk of developing mental health problems.

Extracts from *Perception of Negative Emotions in Young People* prepared for the Health Action Research Group by Costello Medical, December 2023.

How Negative Emotions Are Perceived



These concerns about over-medicalisation of emotions are supported by studies exploring the use and perception of anxiety and depression in the literature and wider media. A review of psychology articles published from 1970–2018 and a variety of American English sources such as television shows, fiction, newspapers and spoken language, found that the concepts of anxiety and depression are being simultaneously broadened, intensified and pathologised.

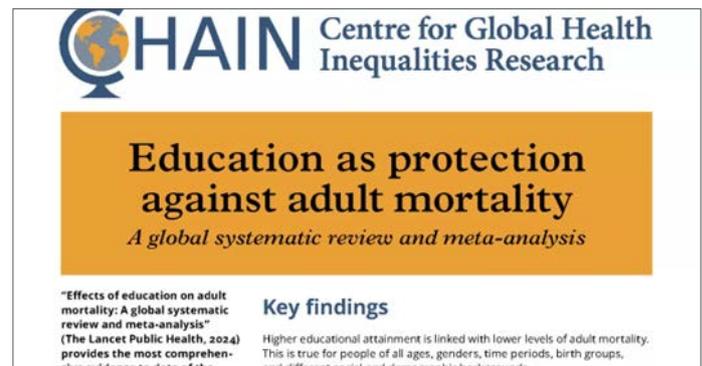
Qualitative research suggests that young people may be over-medicalising subclinical negative emotions such as sadness, stress and worry, which are natural emotions in response to experiences in life. In light of wider discussion in the literature and media that is increasing awareness of mental health among the general public, there are concerns that without parallel improvements in mental health literacy, young people may be more likely to self-diagnose, which could lead to a further decline in mental health, both putting further strain on the UK National Health Service (NHS).

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Healthy Ageing

Meanwhile our Age Watch website (www.agewatch.org.uk) continued to provide evidence-based health information to help people age healthily across their life course, including sharing the following research findings:

- Increased sedentary time in childhood can raise cholesterol levels by two thirds as an adult, leading to heart problems and even premature death.
- The link between higher levels of education and a slower pace of ageing and lower risk of death.



- Smoking shrinks the brain, effectively causing premature brain aging. Quitting smoking prevents further loss of brain tissue but doesn't restore the brain to its original size.
- How Vitamin D may reduce the risk of dementia.

The website has received over 340,000 hits in the last twelve months. Our thanks to John for his editing expertise and to our researchers, in particular Barbara, Harrison and Karen, for their contribution.

Working to influence health policy

We are particularly concerned by the growing health inequalities in the UK, which were exacerbated during COVID. Over the last year we have therefore continued to press for preventative action to reduce the health risks arising from these inequalities.



As the Office for Budget Responsibility has confirmed, poor health is one of the greatest fiscal threats we face. New ONS data shows that 2.8 million people are currently out of the labour market because of long-term illness, while research by the IPPR Commission on Health and Prosperity has shown that long-term illness explained over half of all employment exits between 2015 and 2022.

Bold new action to create healthy Britain is the clearest, untapped path to prosperity we have. As the Times Health Commission has so convincingly argued recently, that requires rethinking our approach to health - and beginning to see health intervention as an investment, not a cost.

These are areas where the public is ahead of the politicians and commentariat. The public overwhelmingly believe the government should have a stronger role in acting to create healthy lives and to take pressure off the NHS. That is, they agree with Churchill that, 'healthy citizens are the greatest asset any country can have.'

We're calling on you to issue a formal call for evidence as part of the 2024 Spring Budget, on financial and non-financial health policy options that help make it easier for everyone to lead healthy lives - by shaping the environments they grow, learn, work and play in.

Extract from a letter to the Chancellor, Jeremy Hunt in February 2024, signed by Health Action Research Group alongside other health organisations, coordinated by the Institute for Public Policy Research



It has now been over four years since the Government pledged to introduce restrictions on the sale of energy drinks to under 16-year-olds, following extensive public consultation and examination of the evidence of the impact of these drinks on children's health and wider behaviour.

Researchers from the Centre for Translational Research in Public Health, at Teesside University and Newcastle University have today published a review of the latest and best quality evidence relating to the impact of energy drinks on children and young people's health. The results suggest the effects of these drinks are more significant and broader than previously understood - in particular negative outcomes for children's mental health in addition to physical health.

We are calling on the government to uphold its promise and finally implement the national sales restriction on these harmful drinks to under 16s. Four years of inaction on this issue is simply too long

Extract from a letter to Secretary of State for Health and Social Care, The Rt Hon Victoria Atkins MP, 15th January 2024, signed by Health Action Research Group alongside other health organisations.

Working to influence health policy



1. Human physiology and psychology are unlikely to have changed significantly in a few generations. However, the environment children are growing up in clearly has - suggesting an increasingly obesogenic environment is the primary driver for obesity among both the general population and people living in deprived areas.
2. Obesity is a classic example of prevention being better than cure. Only 2-3% of obese adults currently achieve a healthy weight over a ten-year period, confirming the importance of action to prevent children and young people becoming obese in the first place.

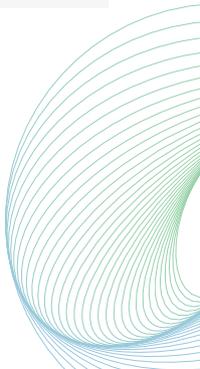
3. Successive Conservative governments appear to have taken the lobbying of food and drink companies at face value, resulting in longstanding and continuing delays to the implementation of action to reduce the prevalence of obesity.
4. However, reformulation is a relatively routine process for the food industry, already undertaken to meet the tastes and regulatory requirements of different markets.
5. New technologies continue to emerge, making it ever-easier for food companies to mass-produce food lower in sugar, salt and fat without recourse to artificial ingredients.
6. Governments should therefore not be afraid to take action to ensure healthier mass-produced food in the UK. As McKinsey have persuasively argued, legislation to ensure a level playing field is in the interests of food companies themselves, by reducing perceived business risk.

Extracts from written evidence provided by Health Action Research Group to the House of Lords Select Committee on Food, Nutrition and Obesity, April 2024

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Healthy citizens are the greatest asset any country can have.

Winston Churchill



Working to influence health policy

With a General Election due in 2024, we have also been seeking to influence the Labour Party's health policy. For example, in February several of us met with Luciana Berger, who was asked by Keir Starmer to lead Labour's Mental Health Review, and prior to the General Election being announced, we had been organising a round table on protecting children's mental health, to be chaired by Labour's Shadow Minister for Mental Health, Abena Opong-Asare, in June.



How do we stop people suffering with mental ill health in the first place, promote wellbeing and keep people well

We make three recommendations:

- 1. Reduce the risk of serious diagnosed mental health conditions, as these are typically most harmful for those affected and their families and the most expensive for the NHS to treat.**

The most significant preventable cause here is deprivation, typically resulting from poverty.

Neglect and abuse in the early years and growing up in a dysfunctional family are also known risk factors for mental health. These are often (although not always) associated with deprivation. This reinforces the case for reducing deprivation.

- 2. Implement proposed Labour policies which are also protective of mental health**

Labour's plans to reduce poverty and inequality are clearly relevant here.

Research also suggests a potentially protective effect for children and young people from a range of activities and experiences which don't have a mental health label and which often take place outside the classroom, the STEM curriculum and teaching to the test.

Some of these are part of Labour's Plans under other headings (including the NHS Plan, the Opportunity Mission and the Child Health Action Plan) and therefore should be included in the Mental Health Review.

- 3. Consider how to define mental ill health, so that time and resources can be targeted effectively and to enable progress to be monitored over time.**

Perceptions of mental health, diagnostic criteria and the use of mental health terminology have changed in recent years. This suggests it would be helpful, as a part of the Mental Health Review, to clarify what 'mental ill health' means in 2024.

Once it is defined, this will make it easier to target where action is needed. Distinguishing between what the NHS describes as normal and what it considers abnormal (for instance in relation to anxiety, stress, loneliness, panic and difficulty sleeping) may be one useful criterion here.

Health Information

Our X account https://x.com/healthaction_uk continued to provide a regular source of health news and reports, focusing on what is needed to reduce the risk of poor health. Examples included:

For physical health

- 1 in 5 Britons will have a major illness by 2040, according to the Health Foundation.
- Most of our health is determined by our social circumstances, with NHS care only accounting for 20% of population health
- Both Labour and the Conservatives say they want to encourage growth – but what if this can't be achieved without lifting workers out of poverty and improving their access to healthcare first?
- Is Britain's broken housing system a major driver of health inequalities throughout people's lives – with high rents, inadequate benefits, low wages and the limited supply of affordable social housing all factors here?

Mental health

- Out of 135 government policies relating to children and young people's mental health, just 36 per cent had been fully implemented – and there is still too little focus on prevention and early intervention.
- Ofcom reports explore children's experiences of harm online – including encountering online content promoting eating disorders, self-harm and suicide, as well as experiences of cyberbullying.
- Living in the North of England increases the risk of 'deaths of despair' – deaths from alcohol, drugs and suicide, with more than twice as many 'deaths of despair' as in London.
- Physical exercise offers similar benefits for depression as psychotherapy and pharmacotherapy.



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