**Chance of dying early 20% higher in north than south of England**

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**The chances of dying early (under 75) since 1965 are a fifth higher in the north of England than the south, finds a study published on bmj.com today (Wednesday).**

An accompanying editorial says the north-south health divide is now at its widest for 40 years and warns that “the north is being decimated at the rate of a major city every decade.”

The north-south health divide in England is well documented and has posed a public health challenge - as well as a political and economic challenge - to successive governments. From 2003 to 2010, the UK government had performance targets for reducing geographical inequalities in health, but there has been little research of time trends in this divide. So, researchers at The University of Manchester and Manchester City Council set out to compare death rates between the north and south of England over four decades.

They analysed deaths and population data for all residents each year from 1965 to 2008 from the five northernmost and four southernmost English regions. Their results show that overall death rates have been 14% higher in the north over the four decades. This inequality was larger for men (15%) than for women (13%). The north experienced a fifth more premature (under age 75) deaths than the south, and this figure changed little between 1965 and 2008.

This north-south divide decreased significantly but temporarily for both sexes from the early 80s to the late 90s, followed by a steep rise from 2000 to 2008, despite government initiatives to reduce health inequalities over this period. Time trends also varied with age – most striking among the 20 to 34 age group, which saw a sharp rise (22%) in northern excess deaths from 1996 to 2008.

The large north-south divide has persisted despite the fact that overall mortality in England has greatly reduced since 1965 - by about 50% for men and about 40% for women with north and south both experiencing similar reductions.

“These findings point towards a severe, long-term and recently worsening structural health problem in the geography of England, which may not have received the attention it requires from government policy and which has been resistant to specific policies to reduce inequalities in health or regenerate local communities,” said Professor Iain Buchan from the University of Manchester School of Community Based Medicine and Mr John Hacking from Manchester City Council’s Joint Health Unit.

“More research is needed into: why policies to reduce such inequalities have failed; how the wider determinants of health may be unbalanced between north and south; and what role selective migration plays.”

In an editorial also published today, Margaret Whitehead**,** Professor of Public Health at the University of Liverpool, and Tim Doran, Clinical Research Fellow at The University of Manchester, warn that future prospects look grim. They argue that deprived northern communities have “borne the brunt” of the current recession and that government spending cuts “will also hit hardest in the north”.

They believe that the NHS must do more than pick up the pieces and call for “a national overview” of access to NHS services for different sections of the population living in different parts of the country. “Otherwise, the result could be chaos and an even wider health divide.”

Ends

**Notes for editors**

A copy of the paper is available on request.

Main points:

* Every year 37,000 people (a football stadium full) die in the North earlier than they should have died if they had the same life chances of those in the south.
* You are a fifth more likely to die before your time (age 75) in the north.
* The north-south mortality divide has changed little since 1965, even rising from 2000-8 while the Government spent £20bn to reduce inequalities in health.
* In economic boom times the south seems to enjoy more of the health benefits of greater wealth than the north.
* Now, as the recession bites, unemployment is set to hit the north harder and drive the health gap further apart.
* Differences in behaviours explain less than a fifth of the gap – the north-south health divide is structural rather than cultural or behavioural.
* Social and economic resources are key. The south enjoys a quarter more disposable income than the North, up from a fifth fifteen years ago.
* Investments in economic stimuli such as research and transport are less in the north.
* Action is needed on two fronts: 1) focusing social and economic recovery efforts on the north, in addition to Public Health initiatives; 2) making sure that the NHS has sufficient resources to treat the excess ill health in the north. To act only at a local level on inequalities would be like putting out the fire in the shed while the house burns.
* It makes sense for the whole country to prioritise northern recovery because the plans to increase the pension age will see the south paying to compensate for the lack of a healthy workforce in the North.

This press release received widespread national and regional media coverage. Read the BBC Online article here: <http://www.bbc.co.uk/news/health-12464427>

BBC Northwest Tonight footage (16/02/11) can be viewed here: <http://www.bbc.co.uk/i/ylsq0/>