

Appendix 2 – Evidence

Evidence for integrating wellbeing services

There is an emerging evidence base on the benefits of integrating public health services. The Kings Fund (2018) highlighted that there is significant co-occurrence of smoking, drinking, physical inactivity and poor diet among individuals in England. It is recognised that these behaviours rarely happen in isolation from each other. However services and policies designed to help people change their behaviours tend to consider these behaviours in isolation and do not consider that many people experience more than one behaviour simultaneously. It is clear that having many risk factors has a negative impact on how long people live life expectancy and how long people live in good health (healthy life expectancy).

Evidence for a community approach

Public Health England suggest that there needs to be a whole-system, partnership approach implemented across healthy lifestyle services, utilising the networks which have been developed in each locality, to ensure integration between the statutory sector and the voluntary and community sector and address community-specific needs. They highlighted that the drivers for integrating health and wellbeing services were varied and included the following;

- To be more financially efficient
- To increase capacity
- To streamline pathways
- To improve user experience
- To respond to client feedback.