

Many proposals in government's public health white paper lack evidence

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Many of the proposed actions in the government's white paper Healthy Lives, Healthy People lack evidence of effectiveness and some have even been shown not to work, according to an analysis published in the British Medical Journal today.

In his speech to the Faculty of Public Health conference in July 2010, Andrew Lansley, the secretary of state for health, stated: "Our new approach across [public health services](#), must meet tougher tests of evidence and evaluation ... We must only support effective interventions that deliver proven benefits."

But how well is the government following its own advice?

Srinivasa Vittal Katikireddi and colleagues examined the quality of evidence that underpins proposed actions in the white paper, Healthy Lives, Healthy People.

They identified 51 statements describing specific interventions aiming to improve population health in the white paper. Two reviewers then searched for evidence relating these actions and appraised its quality. They also asked expert advisers to review the completeness and accuracy of their assessments.

Interventions related to areas such as physical activity, food, alcohol, tobacco, employment and welfare, green space, housing and neighbourhoods.

They found that, while some interventions are in keeping with the existing evidence base, many are likely to be ineffective or lack evidence of effectiveness. Large gaps in the research evidence remain, they add.

They suggest that ineffective interventions such as universal (rather than targeted) cardiovascular risk screening for those aged 40-74 years should not be implemented, and novel interventions such as sports competitions for children should be rigorously evaluated.

They point out that they selected the white paper as a case study because it advocates that interventions should be evidence based. They have therefore not considered many other actions being implemented by the coalition government that are likely to affect population health and inequalities, such as the increase in value added tax and cuts in public spending.

They also acknowledge that some of the policies in the [white paper](#) are continued from the previous Labour government, so the variable quality of evidence is not unique to the present administration.

"We do not believe that a lack of robust evaluations should prevent an intervention from being implemented," they write. "However, when action is taken its effects should be rigorously evaluated."

Finally, it should be remembered that, as with medical interventions, many [public health](#) interventions have the potential to cause harm, they conclude. In the words of the House of Commons Health Select Committee, "Such wanton large-scale experimentation is unethical, and needs to be superseded by a more rigorous culture of piloting, evaluating and using the results to inform policy."

Provided by British Medical Journal

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