

Health Inequalities

Wandsworth Healthwatch Assembly

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1. Health inequalities across Wandsworth
2. Work contributing to reducing health inequalities in
Wandsworth

What do we mean by health inequalities?

Health inequalities are:

- **Unfair** differences in health within the population across social classes and between different populations by gender or ethnicity

These unfair differences:

- Are **not random**, or by chance, but largely socially determined
- Are **not inevitable**.

Social Determinants of Health

The social determinants of health are the conditions in which we are born, we grow and age, and in which we live and work.

These include...



Childhood experiences



Housing



Education



Social support



Family income



Employment



Our communities



Access to health services

Each of these factors impact on our health and wellbeing

A fairer society is a healthier society

The life course approach

Life stages



Preconception

Infancy and early years (0 to 5)

Childhood and adolescence (5 to 24)

Working age and adults (16 to 64)

Older people

What is Wandsworth trying to achieve ?

- Better overall health
- Increasing the number of years lived in good health
 - healthy life expectancy
- Reducing early deaths from preventable diseases
- Less variation in health and wellbeing across the borough

Wandsworth Joint Health and Wellbeing Strategy (2015-20)

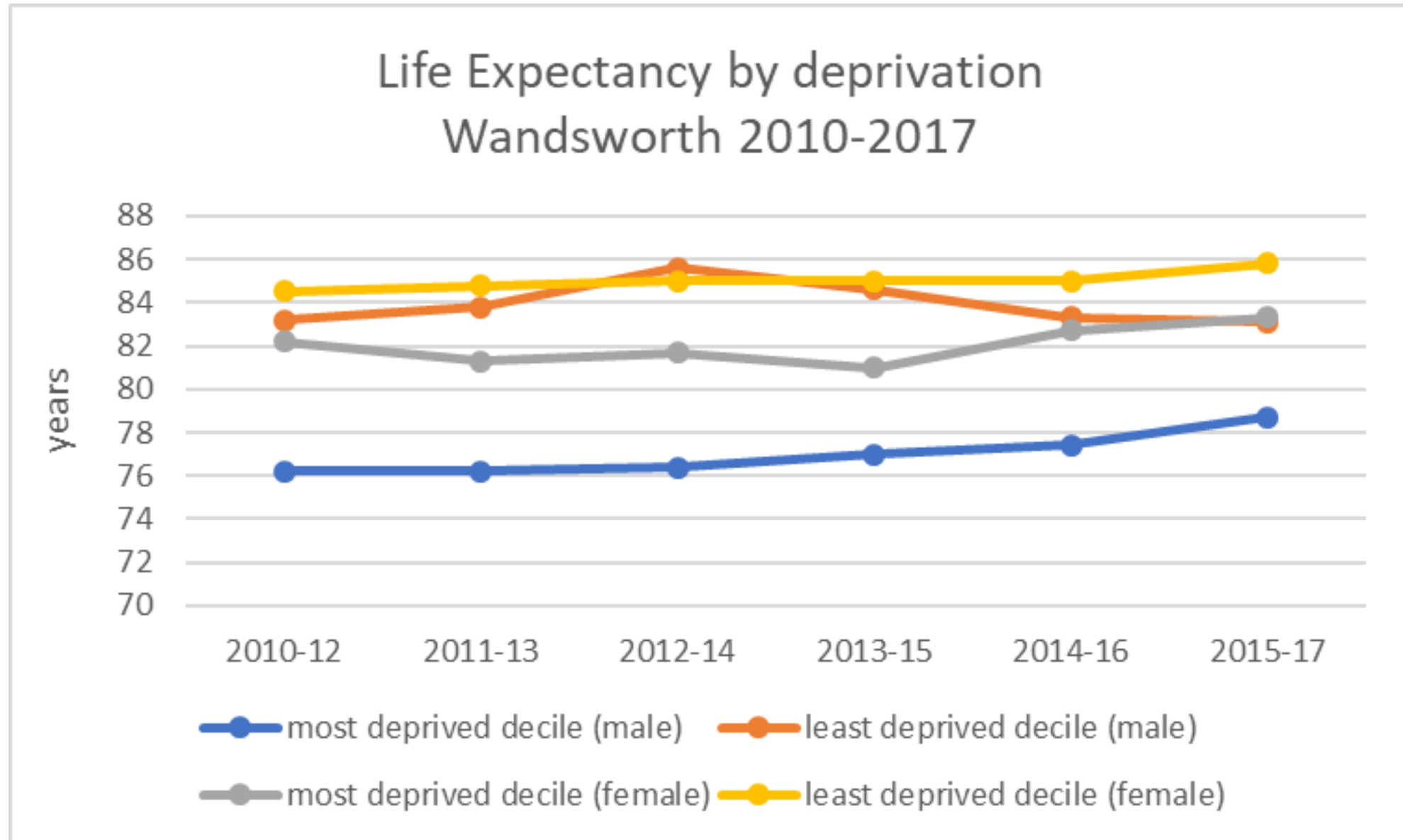
Vision

To make Wandsworth the healthiest place to live in London by reducing the difference in health and life expectancy between the wealthiest and most deprived people.

Priorities

1. **Healthy places** – urban design, healthy homes, building community assets
2. **Targeted interventions** – target those in most need, intensive interventions, support employment, healthy living hubs
3. **Mental health** – prevention, early intervention, control and recovery

Measures of Health Inequalities



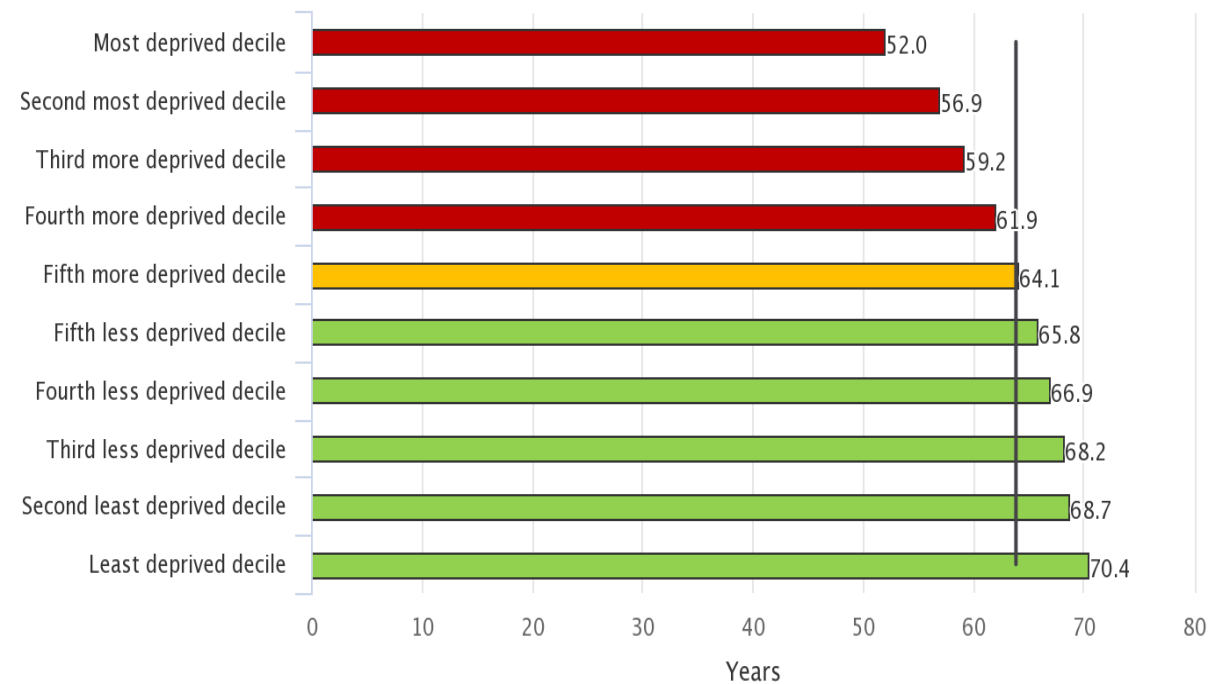
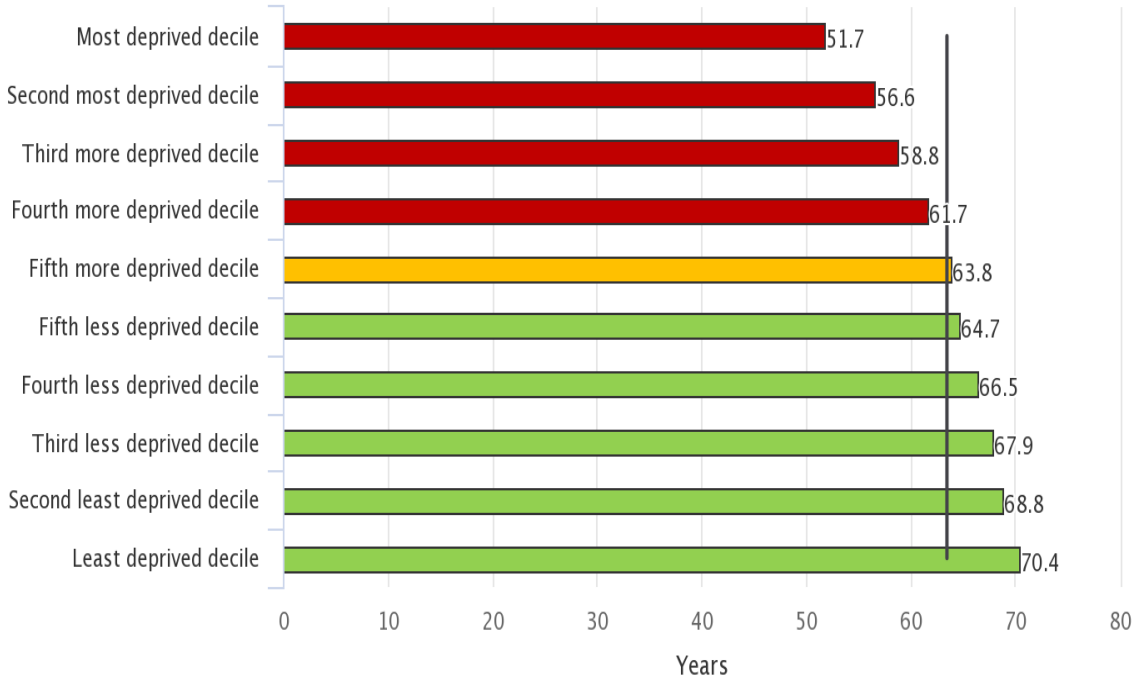
Healthy Life Expectancy by deprivation (2015-2017)

Male

Female

0.1i - Healthy life expectancy at birth (Male) (2015 - 17) - England LSOA11 deprivation deciles in England (IMD2015)

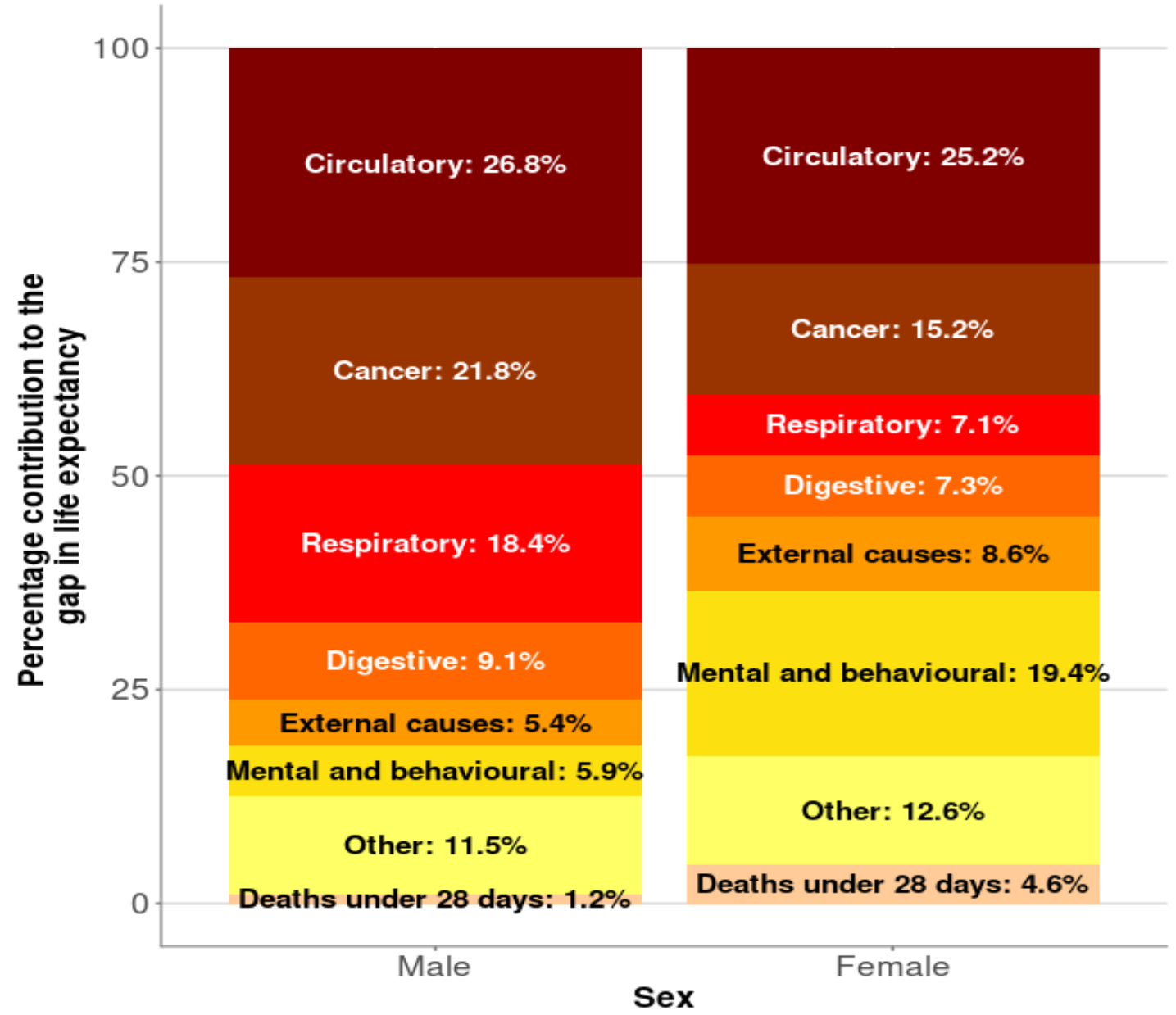
0.1i - Healthy life expectancy at birth (Female) (2015 - 17) - England LSOA11 deprivation deciles in England (IMD2015)



— England

— England

Breakdown of life expectancy gap between most and least deprived in Wandsworth by cause of death (2015-17)



Source: Public Health England

Examples of projects across Wandsworth

- Differences in several health determinants underlie the health inequalities such as in smoking, alcohol consumption, diets or physical activity levels
- **Public health team utilise Differential Commissioning** to ensure services are meeting the needs of our local communities
- **Active Wandsworth Strategy (2017-22)**
 - community sport and physical activity strategy
 - **Physical inactivity** is one of the leading causes of premature death and increasing physical activity has multiple **health**, social and economic benefits
 - Includes exercise on Referral, Slimming World/Weight Watchers vouchers, Kick the Fat (football training/nutrition for men).



MAYOR OF LONDON

- **London Healthy Workplace Award-**
 - clear and easy steps for employers to make their workplaces healthier and happier.
 - Healthy lifestyle promotion, mental health & wellbeing, corporate support for wellbeing
- **Stop Smoking service**
 - Addressing health inequalities
 - Rapid analysis to see how well programme reached those living in deprivation
 - 74% services reached most deprived groups

On the horizon: Social Prescribing

- **Social prescribing** enables GPs, nurses and other primary care professionals to refer people to a range of **local, non-clinical services**
- The Low Commission (2015) estimated that around 20% of patients consult their GPs for a **social problem**.
- **Community-centred way of working** so it can be effective in improving the health and wellbeing of marginalised groups and vulnerable individuals and is a way of **reducing health inequalities** within a local area or community.
- Benefits include people with mild or long-term **mental health** problems, **vulnerable groups**, the **socially isolated**, and people who frequently attend either primary or secondary health care.