

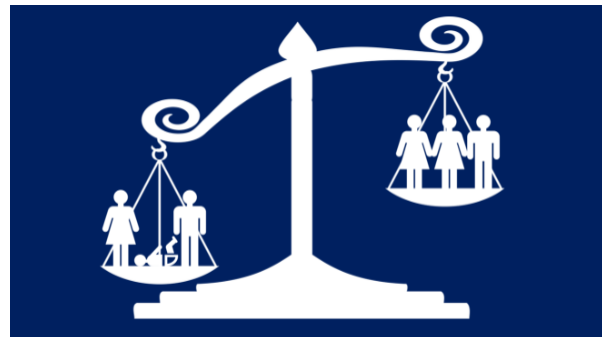
# Health Inequalities and its impact in Wandsworth

Healthwatch Wandsworth Assembly 23<sup>rd</sup> May 2018  
Public Health Wandsworth



# What are health inequalities

Health inequalities are the unfair and avoidable differences in people's health across different population groups such as gender, where you live, age, disability, sexual orientation or ethnicity amongst others.



Dealing with health inequalities goes hand in hand with the prevention approach.

# What does health inequalities look like in Wandsworth

**10** Wandsworth primary schools in areas that exceed the legal air pollution limits



**14%** the percentage point gap in attaining a **good level of development** at the end of reception for children with free school meals, which widens to 24% by key stage 2



**1 in 4 victims** of recorded **fraud** are aged 65 and over

The rates of physical and mental ill health and health risk behaviours are higher in **LGBT+ population** than the wider population.

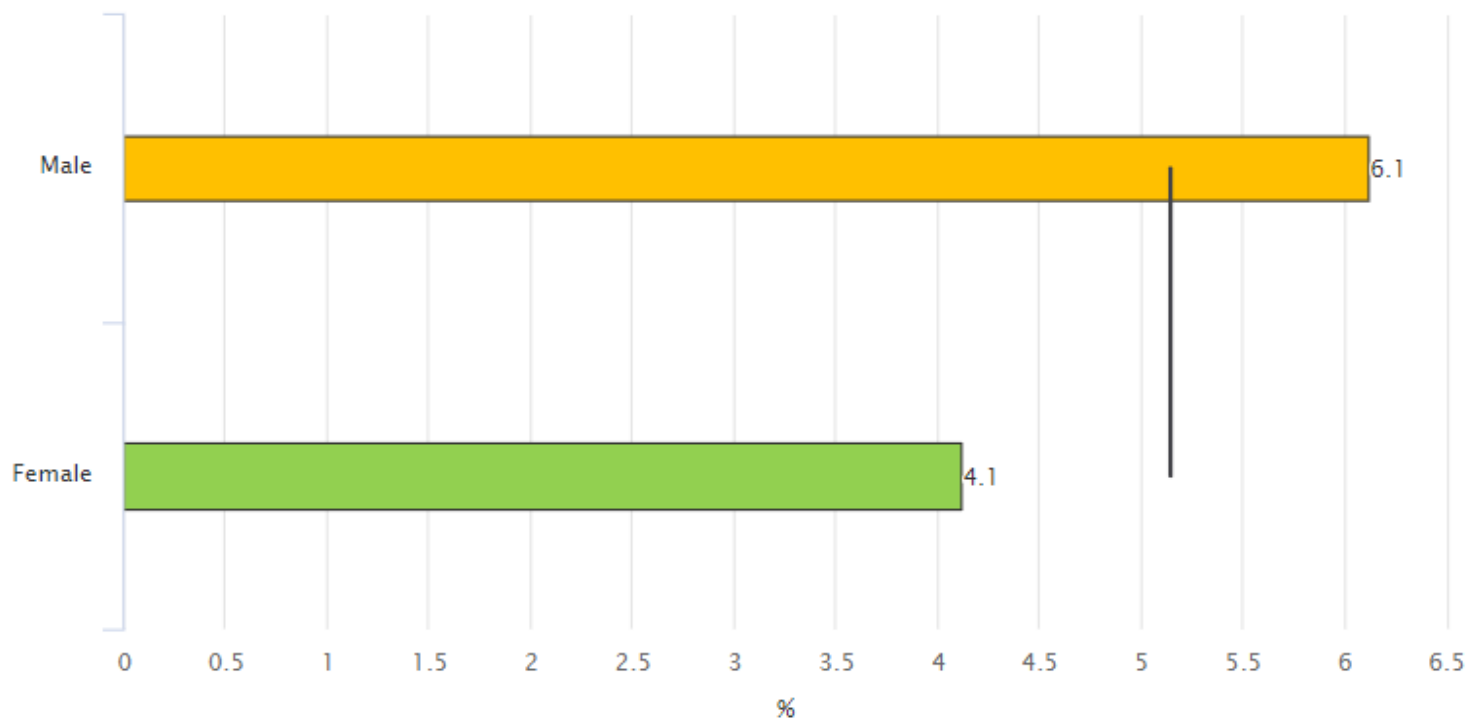
**Life expectancy** is 9.3 years lower for men and 4.5 years lower for women in the most deprived areas of Wandsworth than in the least deprived areas.

People from **Black or Asian communities** are more likely to develop diabetes than the general population.



# 16-17 year olds not in education, employment or training (NEET) or whose activity is not known - current method

Wandsworth, 2016

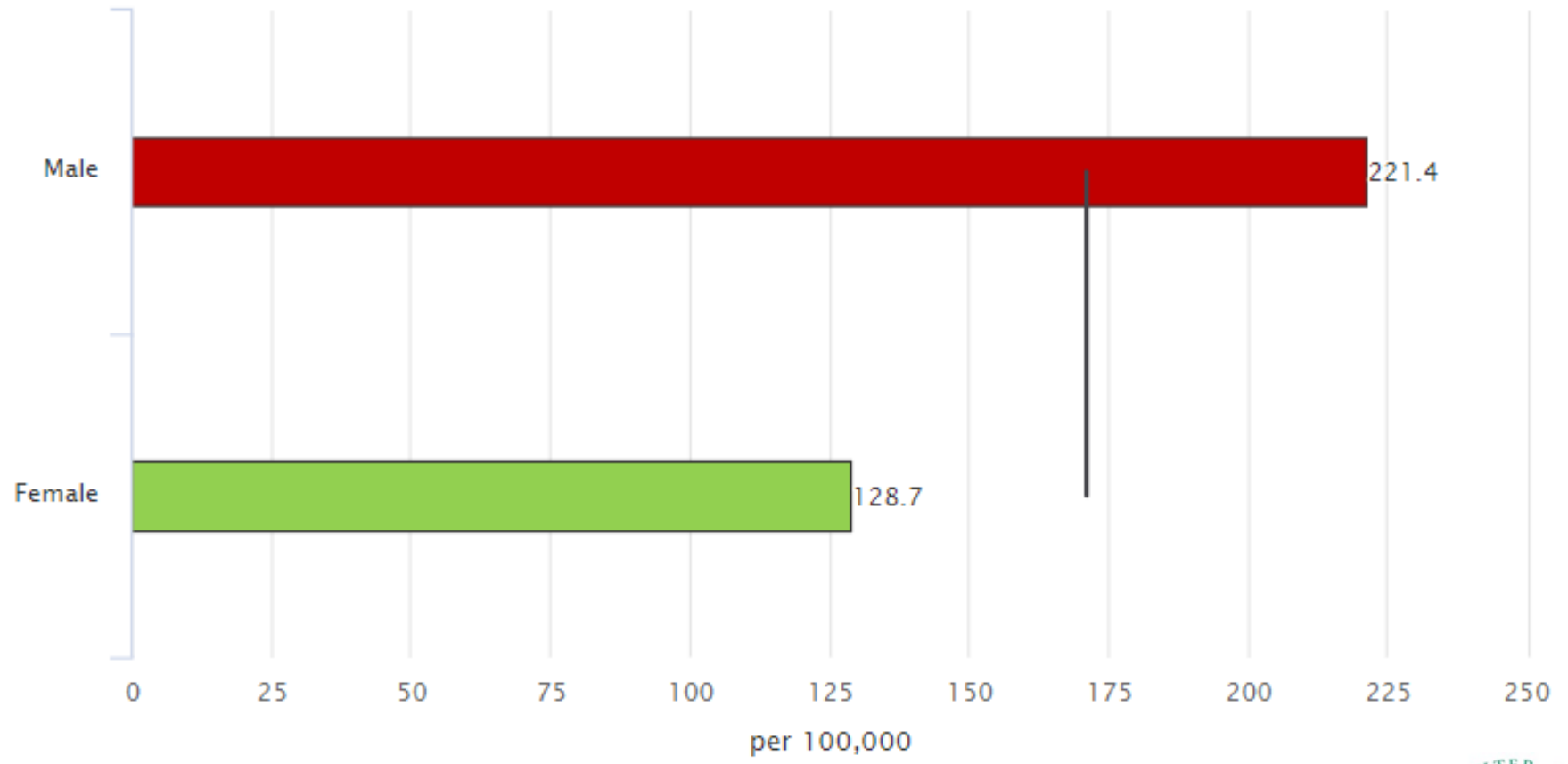


— Wandsworth persons



### 4.03 - Mortality rate from causes considered preventable

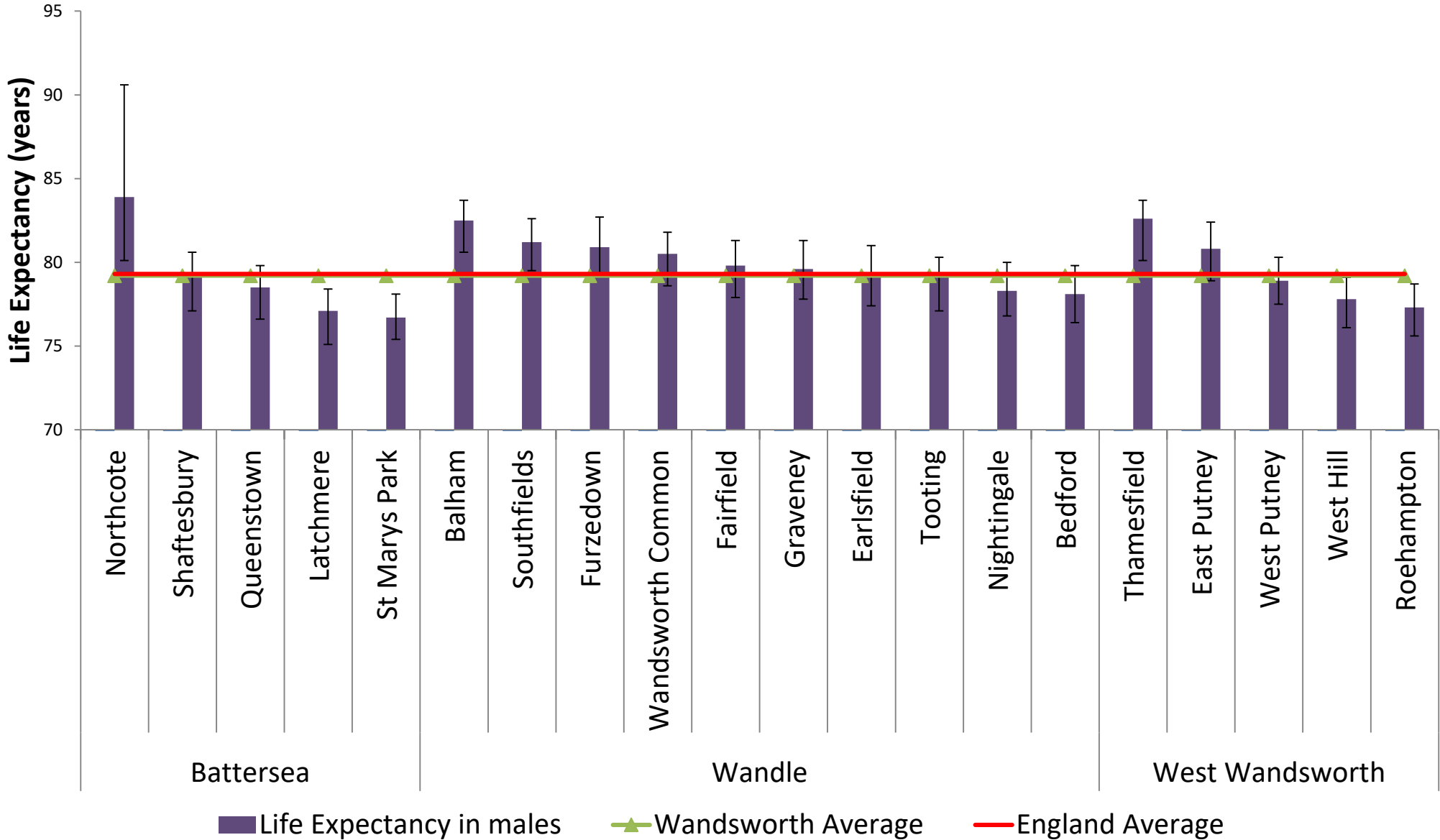
Wandsworth, 2014 - 16



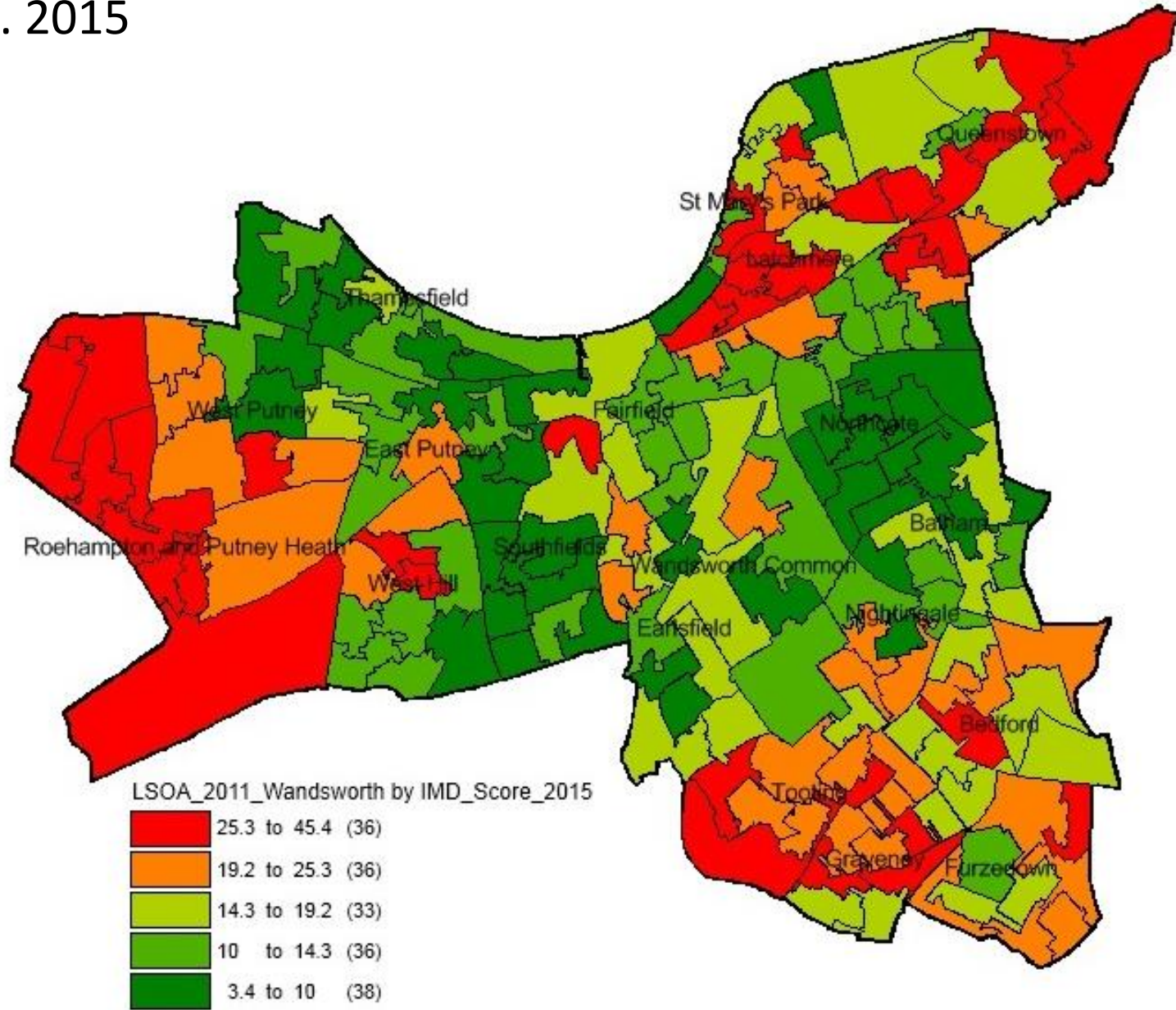
— Wandsworth persons



# Life Expectancy at birth in males by locality in Wandsworth (2010-2014)



# Map showing Index of Multiple deprivation in Wandsworth, LSOA. 2015



# Why reduce health inequalities?

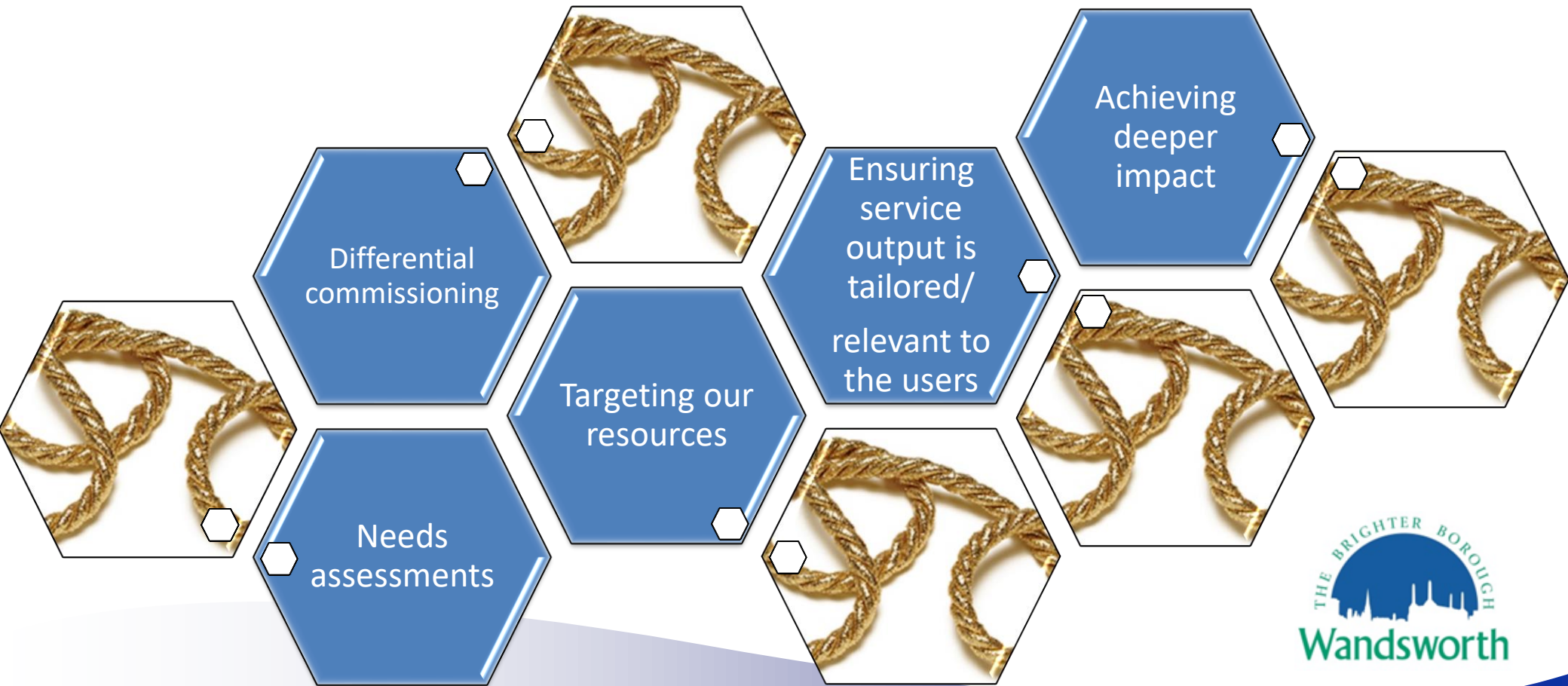
1. Inequalities are unfair
2. Inequalities affect everyone
3. Inequalities are largely avoidable
4. Cost Effective interventions exist

Cities with lower levels of inequality are also healthier overall.



# How health inequalities informs the work we do?

Inequalities is like a golden thread that runs through the work we do.



How have health inequalities affected your experience of receiving or delivering a service?

# Impact in Wandsworth – Diabetes as example

- Local and national health intelligence to understand groups most at risk or experience higher diagnosis rates in Wandsworth
- Prioritise target groups, such as BAME, carers, adults with learning disability, those with mental health problems.
- Tailor the messages so these resonate with each group based on their needs and understanding.
- Rethinking how services are delivered and information is communicated (e.g. leaflet?)
- Diabetes champions from different groups within the communities

# Impact in Wandsworth – Bowel Cancer Screening

# Barriers to participation in bowel screening

Fear and denial around the test outcome



Individual perceived low risk or don't want to know result



Gender - males less likely to take part in screening



Misconception that the test is not applicable if no apparent symptoms of bowel cancer



Lower uptake among ethnic minority groups



Lower socioeconomic group

Concerns around the practicalities and cleanliness of the test



Low health literacy and numeracy



It's important to design activity to **address these barriers** for screening in your area, if relevant.

# Impact in Wandsworth – Bowel Cancer Screening

- Cancer Research UK facilitator identifies and visits GP practices who might need more support with getting their patients to replace the kit.
- Dedicated worker (from various ethnic and religious backgrounds, speaking non-English languages depending on the need) calls patients and asks them whether they received the FOBT kit, if not they can order a replacement for them.
- This person can also assist patients with any questions or unhelpful beliefs they might have. This:
  - Addresses low health literacy
  - Reduces stigma
  - Encourages help seeking services
  - Encourages utilisation of healthcare services.