

# Health Inequalities Framework 2020

Southwark Public Health Division

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## GATEWAY INFORMATION

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# Health inequalities are avoidable, unfair and systematic differences in health between different groups of people

## What are health inequalities?

- Health inequalities are **avoidable**, **unfair** and systematic differences in health between different groups of people. Health inequalities arise because of the conditions in which we are **born**, **grow**, **live**, **work** and **age**. These conditions influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing.
- Differences in health status (and the factors that determine it) can be influenced by:
  - protected characteristics: e.g. age, race, sexual orientation, disability
  - socio-economic factors e.g. income.
  - socially excluded groups e.g. homelessness.
  - geography e.g. region, whether urban or rural.
- People experience combinations of these factors, which also interact. For example, groups with particular protected characteristics can experience health inequalities over and above the general relationship between socio-economic status and health.

### References

<https://www.kingsfund.org.uk/publications/what-are-health-inequalities>

# COVID-19 has exacerbated existing health inequalities in Southwark

## The local picture

- In January 2020, the '*Marmot Review 10 Years On*' reported that over the last decade **health inequalities widened nationally** and the amount of time people spend in poor health has increased since 2010. It highlights the need to improve and strengthen our approach to health inequalities.
- Despite improvements in narrowing the health gap between Southwark and England, stark inequalities within Southwark existed prior to COVID-19 with a life expectancy gap between the most and least deprived areas of the borough of **over 7 years for males** and almost **6 years for females**.
- The COVID-19 pandemic, and the measures put in place to limit its spread, have **exacerbated existing health inequalities** and heightened the need to **renew our approach** to health inequalities.
- The death of George Floyd and the Black Lives Matter movement has highlighted structural racism and injustice in the UK and its impact on society and inequalities.

### References

1. UCL institute of health equity, Health Equity in England: The Marmot Review 10 years on, 2020
2. Life expectancy in Southwark. Southwark Council: London. 2019.

# COVID-19 is disproportionately affecting those who already had poorer health, social and economic outcomes

## Impact of COVID-19 on inequalities

**COVID-19 is having a significant impact on our communities. The immediate and longer term impacts will not be felt equally and may exacerbate existing health, social and economic inequalities.**

- National analysis indicates a number of groups have poorer health outcomes related to COVID-19, including:
  - Older people
  - Males
  - Those with underlying health conditions
  - Certain ethnic minorities, particularly those from a black ethnic background
  - Those in public facing occupational roles e.g. transport
  
- In addition to the immediate health outcomes, the medium and longer term social and economic impacts will have a significant implications for the health and wellbeing of local residents.

**For many residents the health, social and economic impacts coincide, magnifying the challenges they face.**

# A survey of local residents has highlighted the negative impacts of COVID-19 and lockdown on our communities

## The local picture

**Southwark undertook a short survey of local residents to understand the impact of COVID-19 on residents. A total of 1,383 responses were received.**

**The survey highlighted that COVID-19 is having a significant health, social and economic impact on our communities. These impacts are often inter-related and exacerbate inequalities that existed prior to the pandemic.**

**The survey found that those from minority ethnic groups were more likely to report a negative impacts in:**

- Employment (51% reported a negative impact vs 42% of white respondents)
- Finances (63% reported a negative impact vs 44% of white respondents)
- Physical health (22% reported a large negative impact vs 10% of white respondents)
- Mental health (29% reported a large negative impact vs 20% of white respondents)

**The survey also found that respondents from minority ethnic groups were also more likely to have concerns for the future relating to:**

- Uncertainty of the next phase of lockdown (75% vs 63%)
- Financial insecurity (61% vs 40%)
- Personal health (53% vs 35%)
- Health and wellbeing of vulnerable family members (52% vs 40%)

**The survey also found that carers and those with disabilities also reported higher levels of concern for the future than the general population.**

### References

1. COVID-19 Impact Survey 2020. Southwark Council.

# Southwark Stands Together has highlighted issues we need to address to tackle racism and health inequalities.

## The local picture

**During July and August 2020, Southwark Council held six roundtable events as part of Southwark Stands Together.**

- The health-themed roundtable took place online on 5<sup>th</sup> August 2020. 46 professionals and community, patient representatives attended the roundtable event from across different health services and providers in the borough.
  
- The discussion at the roundtable highlighted some key issues to be tackled to address racism and health inequalities for BAME communities in Southwark:
  - Engage with BAME communities and individuals in decision making and to better understand issues
  - Ensure that acute and screening services are culturally appropriate and accessible
  - Improve the uptake of prevention services and support for the wider determinants of health
  - Improve the experiences of BAME patients in accessing healthcare services by tackling racist attitudes

### References

1. COVID-19 Impact Survey 2020. Southwark Council.

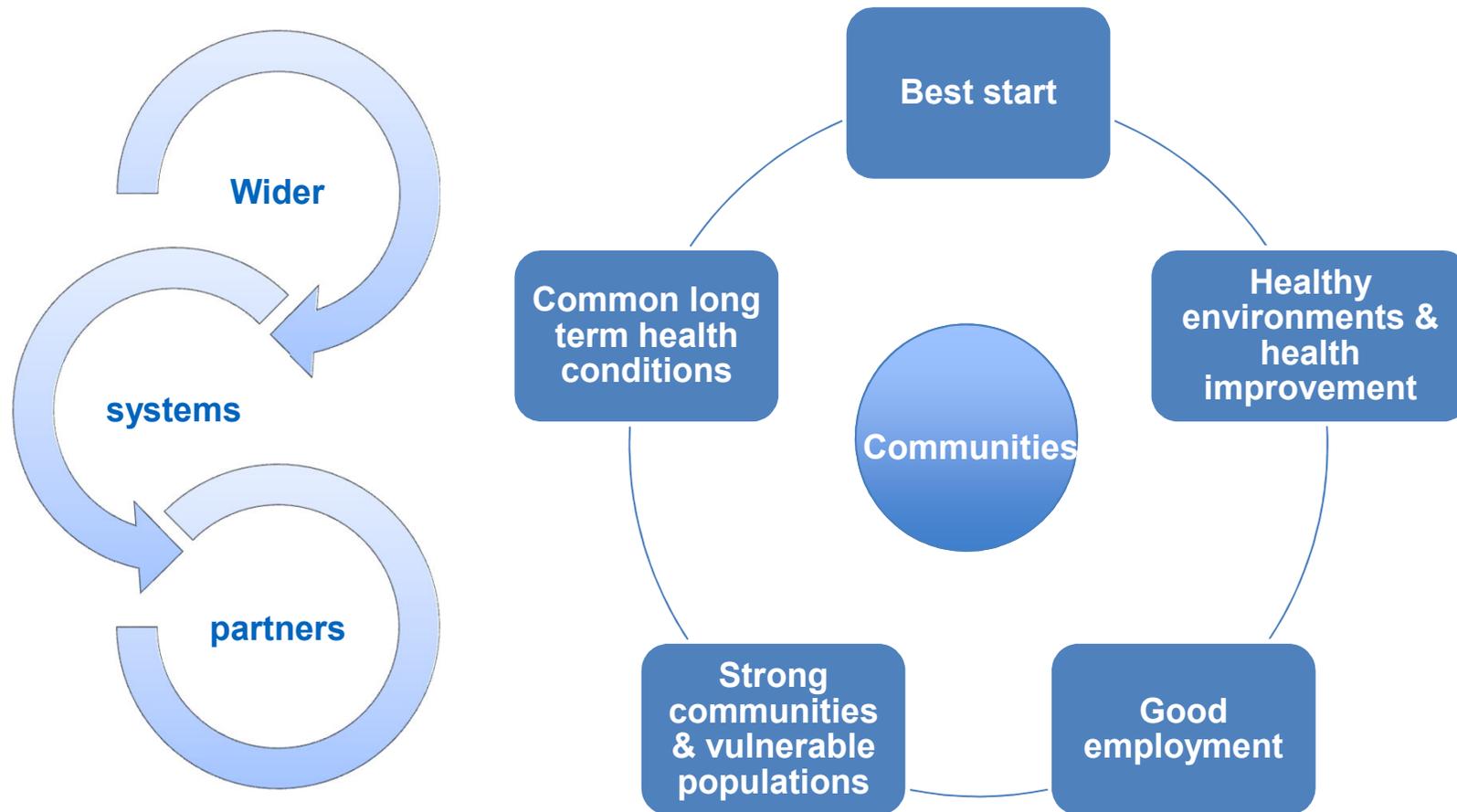
# Timeline for Health Inequalities Framework and Action Plan development

- **August – September 2020** : Develop a draft health inequalities framework
  - HI working group to discuss approach and draft framework
- **24 September 2020**: Draft HI framework presented at the Health and Wellbeing Board for approval
- **September – November 2020**: Develop action plans for each priority
  - Decide leads for each priority
  - Establish governance structure for the plan
  - Engage with communities
  - Work across the council and with partners to populate action plans for each
- **February 2021**: Six month report back to the Health and Wellbeing Board

## References

1. XXXX

# Health inequalities framework for Southwark



- Life course
- Targeted
- Empowerment & co-design

# There are a number of principles that underpin and guide the Southwark's approach to Health Inequalities

## PRINCIPLES

### 1. Lifecourse consideration

A diverse range of factors and behaviours interplay and cluster over the lifespan to impact a person's health. We will consider the critical stages, transitions and settings where large differences can be made in promoting or restoring health from preconception and early years to aging well.

### 2. Targeted services

We will target services and support to communities who need it most and specific population groups with the highest needs and who face challenges including perceptions and experience of discrimination, in accessing services.

### 4. Community empowerment and co-production

We will work in partnership with our communities to develop and implement this framework

#### References

1. XXXX

# Strengthening how we monitor and evaluate equity within services and programmes is an enabler for all this work

## ENABLER

Improving our approach to data collection and equity monitoring and evaluation of our programmes and services is a key enabler for work under all the priorities. This could include:

- Collecting **better data on protected characteristics** through our services and programmes to better understand need and monitor outcomes for different groups.
- Develop a long-term, structured **programme of engagement** building on COVID-19 impacts and Southwark Stands Together engagement to collect qualitative information from our communities to inform our inequalities work
- Develop a more **strategic approach to JSNA development** across the council to align JSNAs with departmental work plans.
- Establish a programme of **equity audits** across the council to determine what population groups we are and aren't reaching and develop actions to improve equity of our services and programmes.

### References

1. XXXX

# Priority 1: Ensure the best start in life for every child

## OBJECTIVES AND EARLY ACTIONS

Objectives	Example actions
Better understand existing inequity	CYP partnership multi-agency workshops to map service offer for 0 – 5’s and review who is accessing them
Develop approaches to tackle inequity	Work with Citizen’s UK to build to develop a Children’s Zone in the OKR that empowers local communities to shape their environment and services so opportunities offered by regeneration are optimised for the most disadvantaged communities.
Deliver programmes targeted at those most in need of them	<p>Strengthen the role of children’s centres as a focal point of support for families in the community and targeting support to vulnerable families.</p> <p>Develop targeted engagement for immunisations to groups with low uptake.</p>
Monitor and evaluate equity of services and programmes	Develop and implement KPIs for programmes to tackle inequality

### References

1. XXXX

# Priority 2: Enable healthy lives through healthy environments and making healthy choices easier

## OBJECTIVES AND EARLY ACTIONS

Objectives	Example actions
Better understand existing inequity	Review the medium to long-term impacts of COVID-19 on physical activity levels of different groups e.g. the shielded population.
Develop approaches to tackle inequity	Renew and strengthen our Healthy Weight Strategy which will target vulnerable populations and those that have been disproportionately impacted by COVID-19 including BAME residents, deprived communities children and over 50's.
Deliver programmes targeted at those most in need of them	Strengthen MH support for those who have been disproportionately impacted by COVID-19 e.g. BAME communities, frontline staff, disabled people and older people.
Monitor and evaluate services and programmes for equity	Review our food initiatives, including our weight management services and food banks, to ensure they offer culturally appropriate options for all our communities and are reaching those who need it most.

### References

1. XXXX

# Priority 3: Ensure fair employment and healthy workplaces for those experiencing economic instability

## OBJECTIVES AND EARLY ACTIONS

Objectives	Example actions
Better understand factors contributing to inequity	Review Social Life business and resident survey outcomes to understand impact of COVID-19 on different population groups
Develop approaches to tackle inequity	The Economic Renewal Plan focuses on businesses and communities disproportionately impacted by financial impact of COVID-19.
Deliver programmes targeted at those most in need of them	<p>Strengthen targeted employment and skills support to mitigate the consequences of COVID-19 on those most at risk of economic instability e.g. People living a disability and those in casual employment.</p> <p>Targeted flu vaccination campaigns at frontline health and social care staff.</p>
Monitor and evaluate services and programmes for equity	Develop and implement KPIs for programmes to tackle inequality.

### References

1. XXXX

# Priority 4: Develop healthy strong places and communities to improve outcomes for vulnerable populations

## OBJECTIVES AND EARLY ACTIONS

Objectives	Example actions
Better understand existing inequity	<p>Review Social Life residents survey and in-depth qualitative work to understand issues and needs in different communities and areas of the borough.</p> <p>Engage with most vulnerable populations including traveler, learning disabilities, undocumented migrants communities, to better understand their health needs and the impact of COVID on these communities.</p>
Develop approaches to tackle inequity	Produce and implement Social Regeneration Charters outlining the approach for each area to improve outcomes for residents through regeneration, particularly our vulnerable communities and those disproportionately impacted by COVID-19.
Deliver programmes targeted at those most in need of them	Implement School Superzones in high need areas (high levels of obesity/ deprivation/ pollutions) to create healthier and safer environments for children and young people.
Monitor and evaluate services and programmes for equity	Develop and implement KPIs for programmes to tackle inequality

### References

1. XXXX

# Priority 5: Support early detection and management of common long-term conditions in high-risk populations

## OBJECTIVES AND EARLY ACTIONS

Objectives	Example actions
Better understand existing inequity	Review local data to understand inequalities in screening uptake.
Develop approaches to tackle inequity	<p>Work with SEL CCG , NHS and VCS to improve management of common long-term conditions in the most deprived areas.</p> <p>Increase the uptake of preventative programmes such as screening, health improvement and education amongst BAME communities.</p> <p>Commission and co-produce health services and interventions with BAME communities.</p>
Deliver programmes targeted at those most in need of them	<p>Target our NHS health checks to BAME communities and those at greater CVD risks</p> <p>Work with SEL CCG, NHS and VCS to develop targeted communications work for our most vulnerable communities to mitigate the impact of the pause in cancer screening.</p>
Monitor and evaluate services and programmes for equity	Work with key partners to ensure health services and initiatives are culturally appropriate and accessible for BAME residents.

References  
1. XXXX

# Next steps following the agreement of the Health Inequalities Framework

- **Establish Health Inequalities Working Group** – the group met for the first time to feed into framework development. This will become an established group and will develop and provide oversight of action plans.
- **Community engagement** – work with the VCS to establish the process for co-design of the health inequalities work stream and a health inequalities community network.
- **Action plans:** develop an action plan for each priority with clear timescales and leads for each action.
- **Data and monitoring:** Establish key KPIs to monitor progress for of each priority.

## References

1. XXXX

**Find out more at**  
[southwark.gov.uk/publichealth](https://southwark.gov.uk/publichealth)

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