

# **Adult Social Care and Health and Wellbeing Sub Committee**

## **Health Inequalities in North Tyneside**

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Health is not just the outcome of genetic or biological processes but is dependant upon the social and economic conditions in which we are born, grow, work, live and age.

The unequal social and economic conditions and influences, often beyond an individual's control, give rise to unequal health status and health outcomes for different social groups.

Health inequalities are avoidable they do not occur randomly or by chance, but are they are socially determined by circumstances largely beyond an individual's control. These circumstances disadvantage people and accumulate across the life course limiting the chance to live longer, healthier lives.

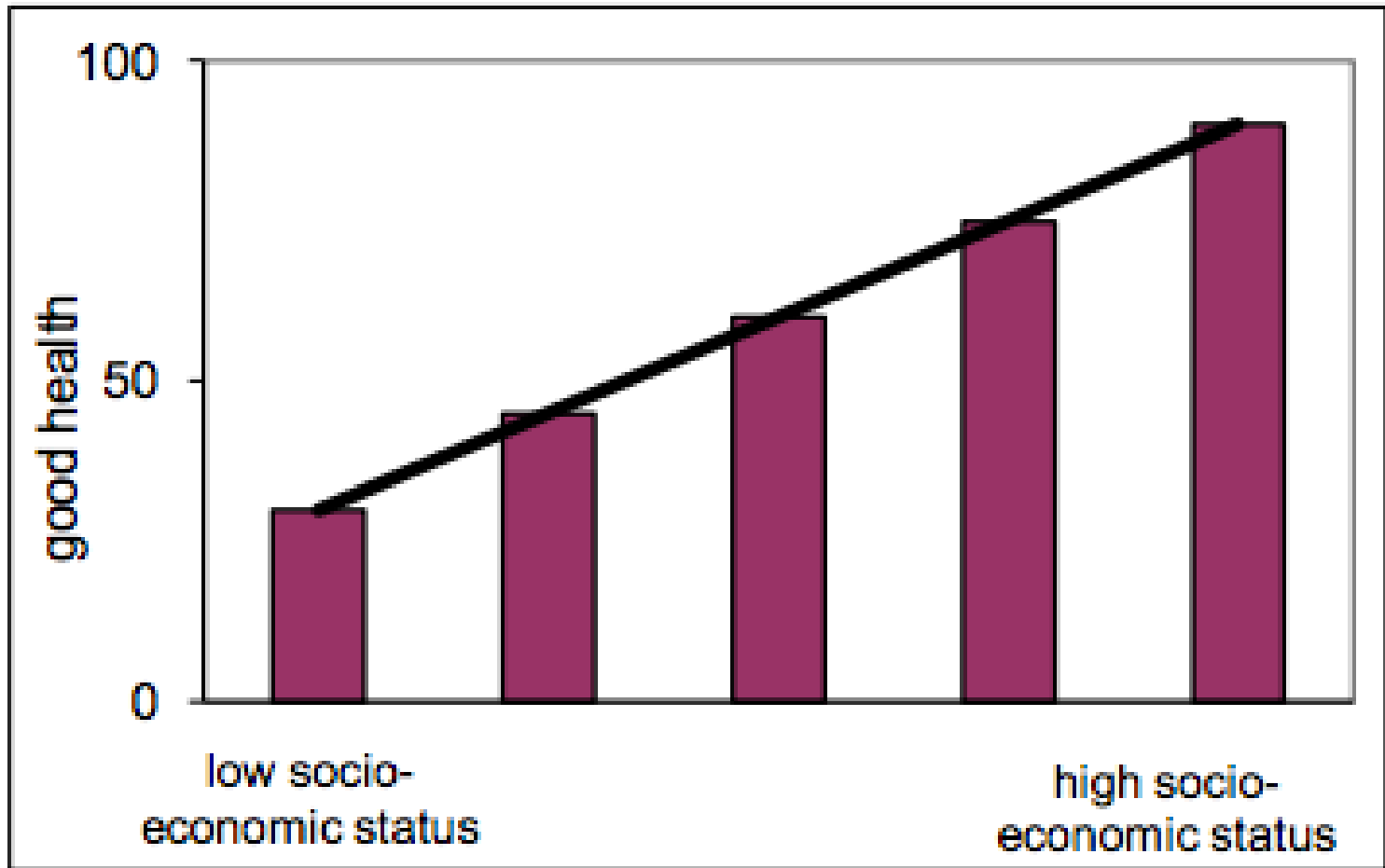


# Sir Michael Marmot

*Fair Society, Healthy Lives: A Strategic Review of Health Inequalities in England Post-2010*

*'People with higher socioeconomic position in society have a greater array of life chances and more opportunities to lead a flourishing life. They also have better health. The two are linked: the more favoured people are, socially and economically, the better their health.'*





## Social gradient in health



# Health Inequalities

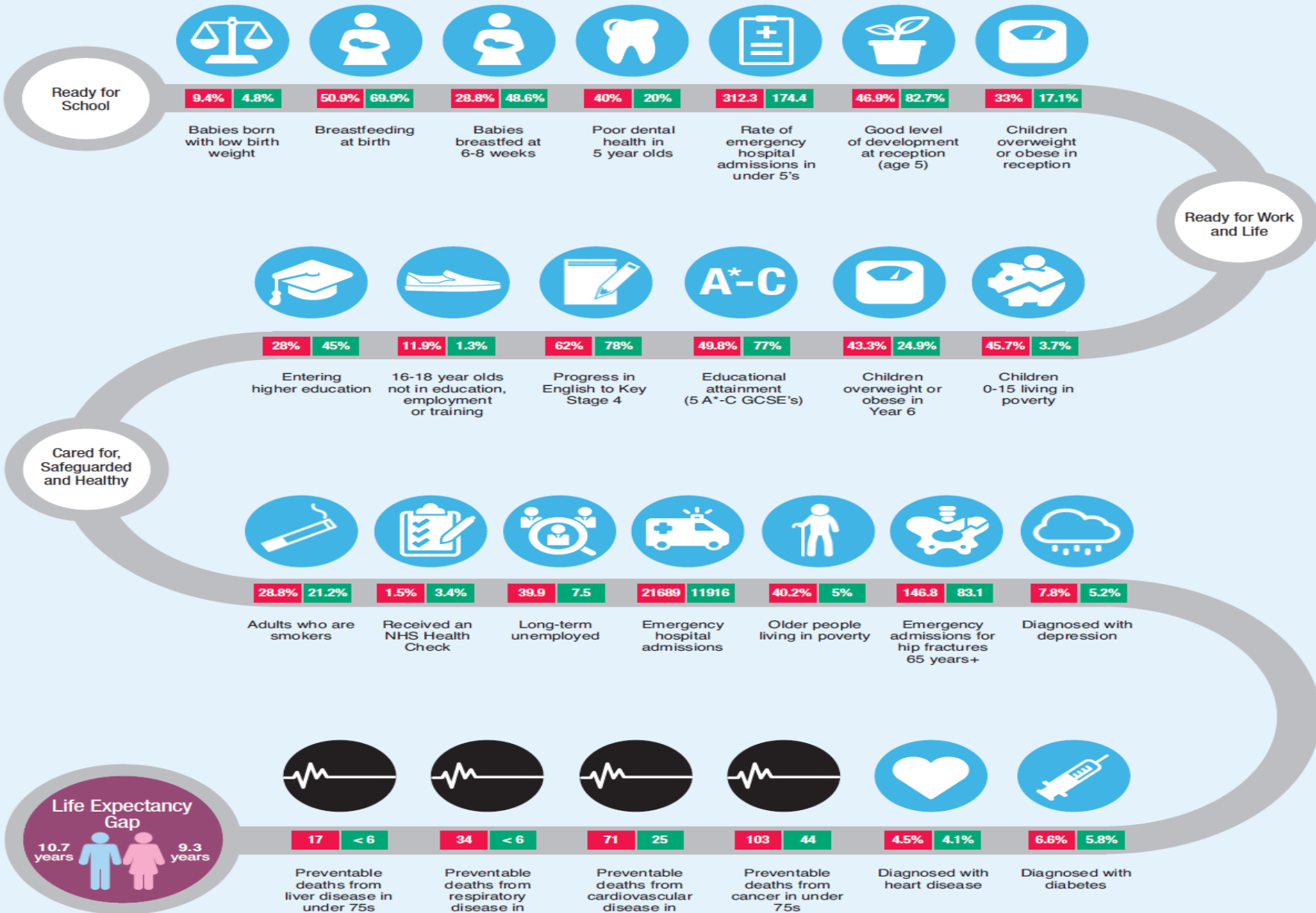
- Geographical
- Age
- Gender
- Socio economic
- Culture
- Social groups



KEY

- Worst in Borough
- Best in Borough

**A child born today in the most deprived part of the Borough will live 10 years less than a child born in the least deprived part.**



# Inequalities in life expectancy

Average Life  
Expectancy

Gap in life expectancy between  
the most and least  
deprived areas

Males



77.7 years

11 years

Females



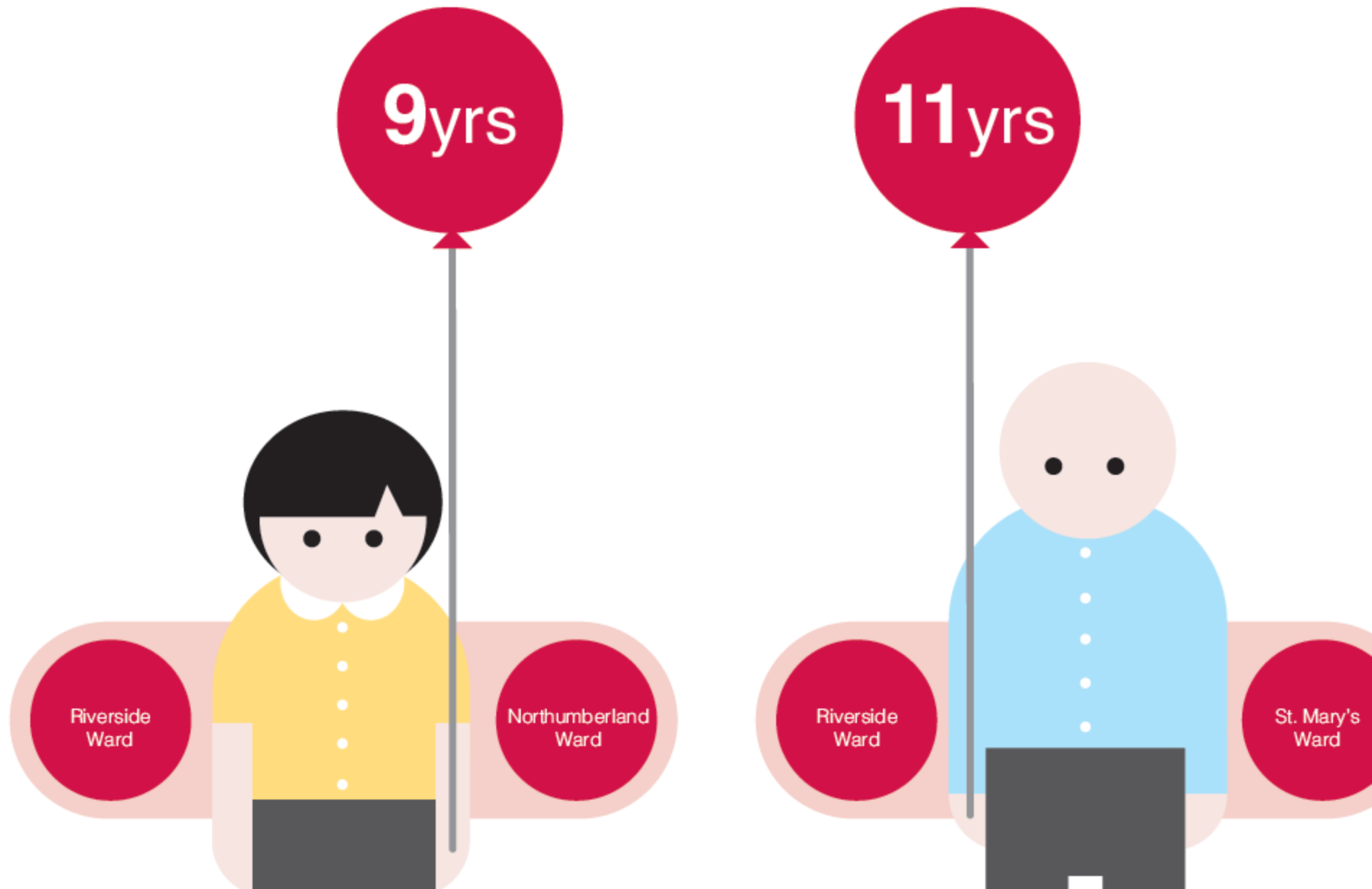
82.4 years

9 years



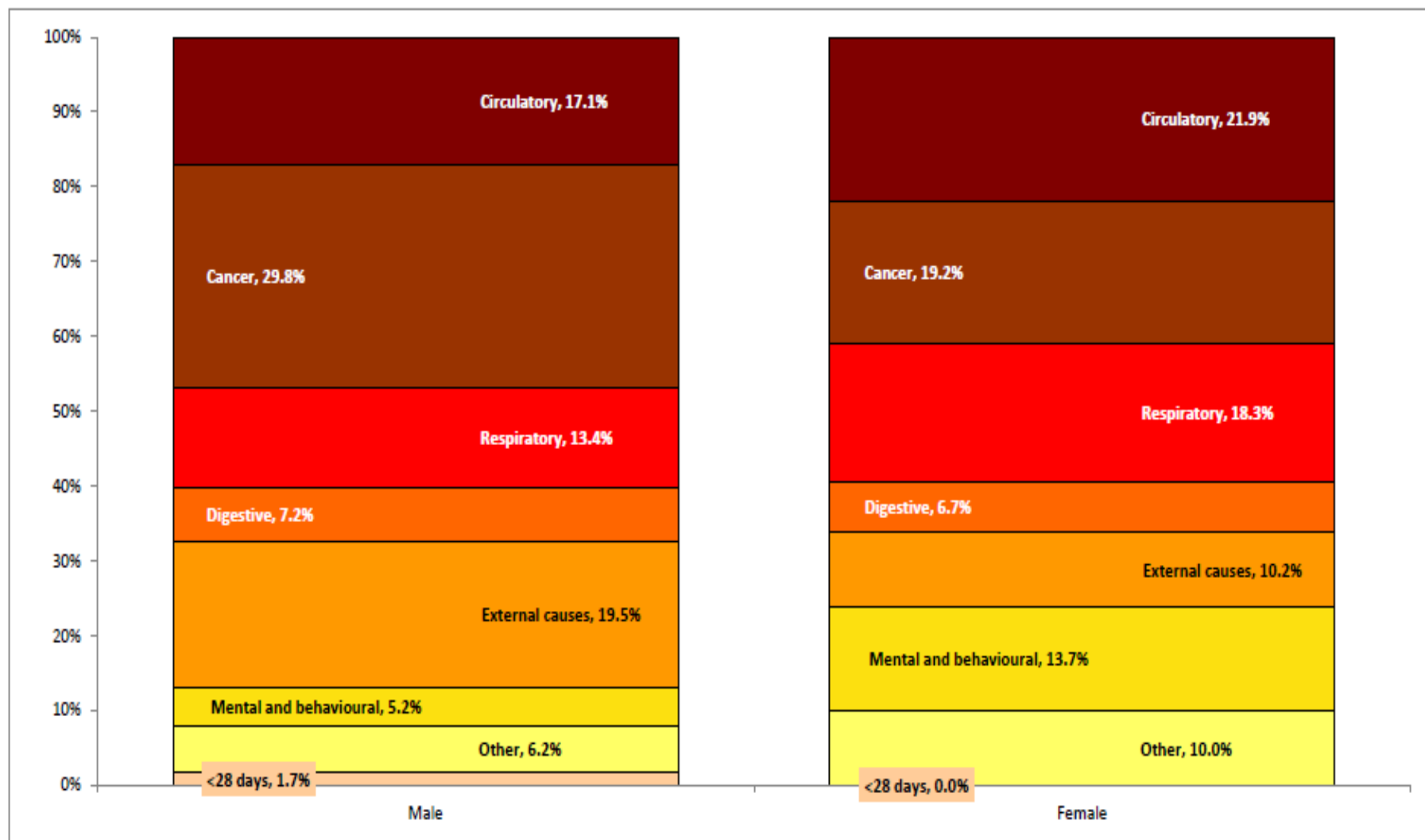
# Life expectancy and inequalities in North Tyneside

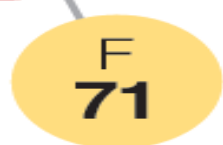
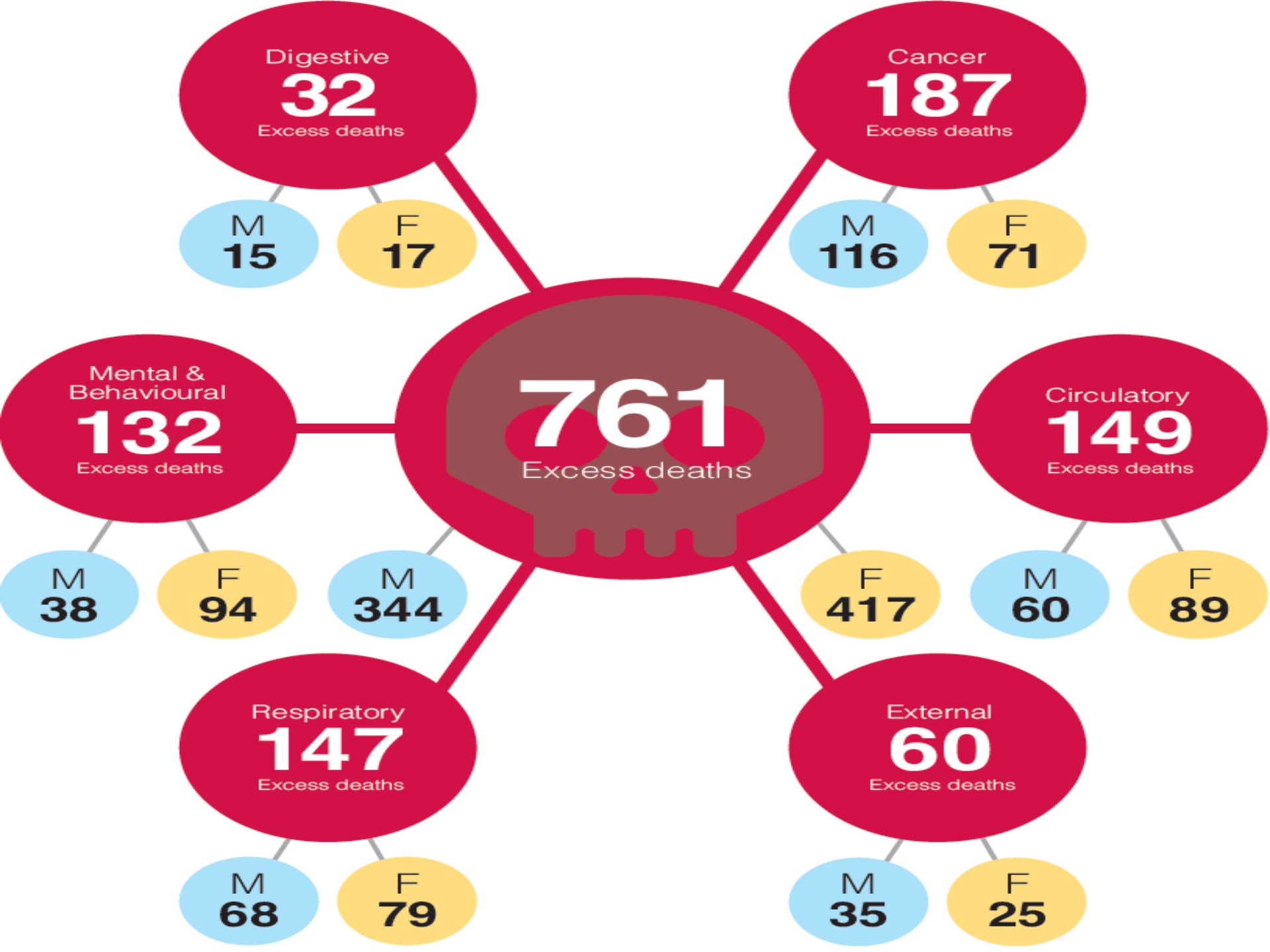
Source: Public England 2016



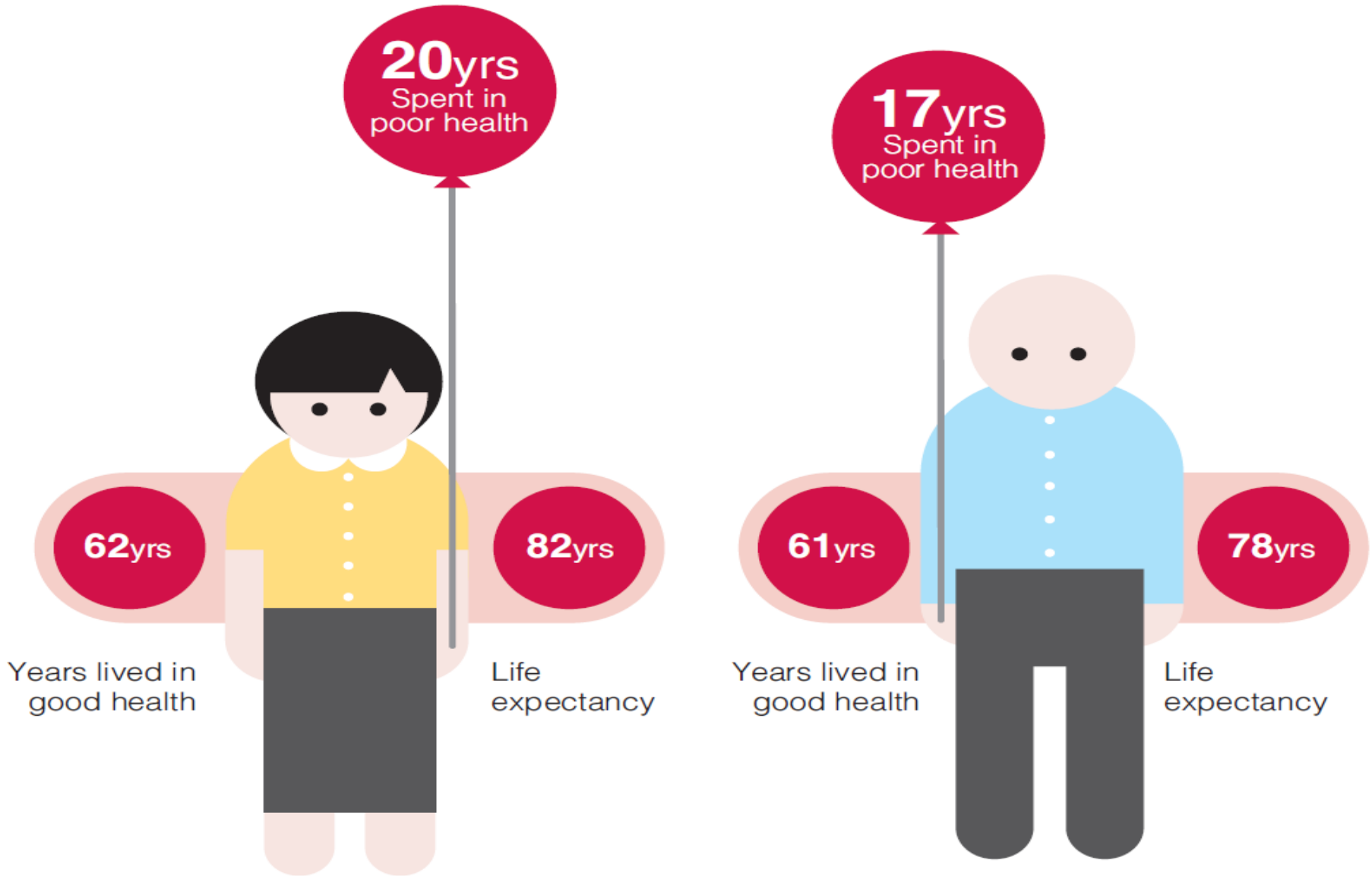


# The percentage contribution that the broad causes of death make to the gap in life expectancy in North Tyneside





# Inequalities and Healthy Life Expectancy



- Smoking is the single biggest contributing risk factor and accounts for around half the gap in life expectancy
- Other key risk lifestyle factors- alcohol, poor diet, physical inactivity affect health and mortality
- Lifestyle risk factors are unequally distributed in the population and are driven by social circumstances
- There is a clustering of multiple risk factors less affluent areas and certain groups
- Causes of health inequalities are inherently complex

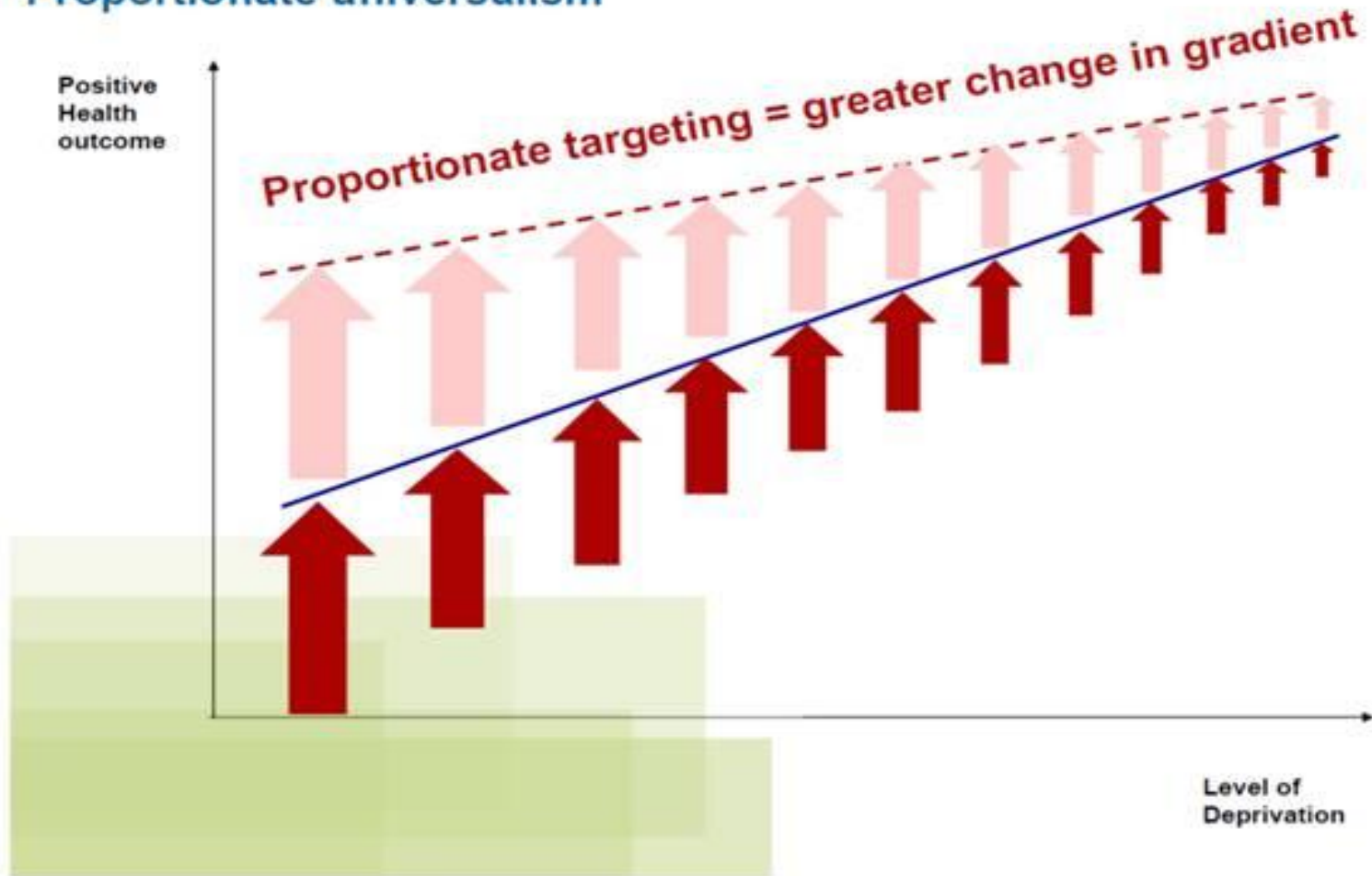


# Tackling Health Inequalities

- We can not just focus on tackling the more apparent and immediate causes of poor health, such as smoking we also need to systematically address the background causes of ill health
- We need a focus on the social determinants of health across the life course as well as lifestyle factors and access to healthcare
- Focusing solely on the most disadvantaged will not reduce health inequalities and the social gradient
- We need focus on improving the health of the population but improving the health of the poorest fastest



# Proportionate universalism



# Evidence for Action

Reducing health inequalities requires action to:

- Give every child the best start in life
- Enable children, young people and adults to maximise their capabilities and have control over their live
- Create fair employment and good work for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention
- Ensure healthy standard of living for all



# Taking Action in North Tyneside

- Focus on early years “ready to learn at 2” and “ready for school at 5”
- Ensuring our young people are ready for work and life
- Focus on provision of universal services for key risk factors of preventable illness with targeted action in less affluent areas
- Strengthening primary and secondary prevention in the NHS
- Promoting the health of the workforce
- Developing capacity of the workforce embed Making Every Contact Counts
- Making best use of community assets
- Targeted work in Chirton and Riverside





# Targeted Work in Chirton and Riverside

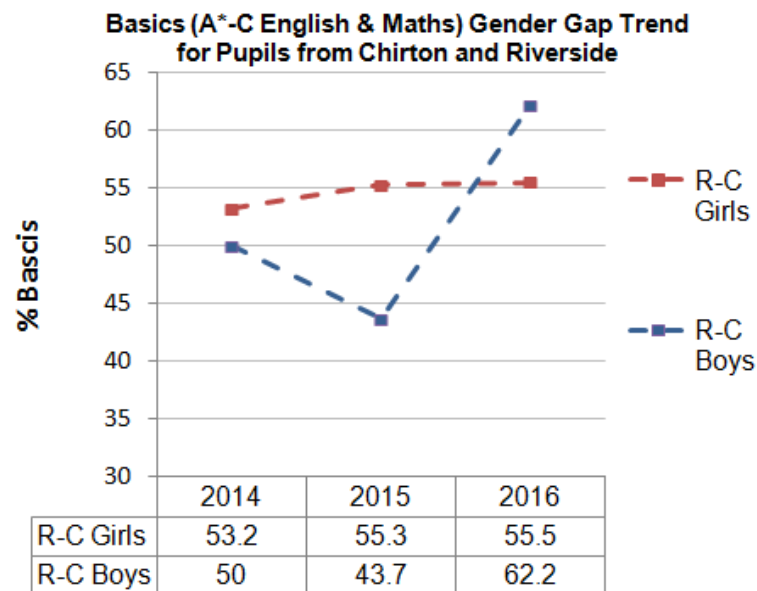
Focus on:

- Education
- Employment
- Housing
- Health



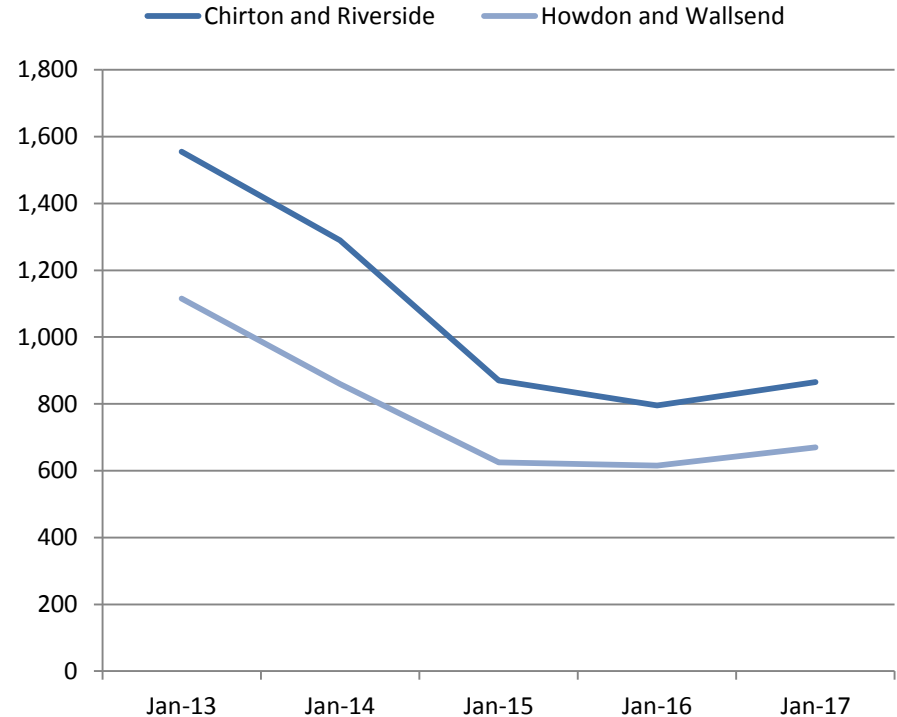
# Education

- A 19% increase in 5A\*-C including English and Maths in 2016
- The improvement in education outcomes for pupils from Riverside and Chirton (measured by A\*-C grades in English and maths) is, in large part, due to increases in maths progress for boys attending Norham High School



# Employment

- Claimant count has reduced since 2013 across North Tyneside
- However the impact of Universal Credit can be seen in 2017
- Two small areas within H&W have seen a larger increase in last year than in C&R



# Safe and Healthy Homes Project

- Remove Category 1 Hazards – reduce risks & improve health
- 7,000 letters to residents
- 385 household referrals
- 301 households received assistance & had hazards removed
- Link to NT Warmzone

Local resident Mr Pagden, aged 72, was referred to the Safe and Healthy Homes Team by a social worker who was worried that the condition of his home was causing health problems.

Mr Pagden has Parkinson's Disease and concerns were being raised about the lack of proper central heating and the condition of electrics by his carers, health workers and the ambulance service – who were regularly called out to him because of respiratory problems made worse by his home not being warm enough.

Safe and Healthy Homes Team member Rob visited Mr Pagden at his home to see what could be done to help.

Rob arranged for an electrician registered with the council to fix some dangerous exposed light fittings, and also arranged for the boiler to be completely replaced at no cost by WarmZone.

As a result, the social care service is no longer involved, the ambulance service is not being called out and Mr Pagden does not need to see his GP as often.

Mr Pagden said: "I am very happy now, I can continue living in my own home and am quite independent. I feel a lot better and my house is lovely and warm. The Safe and Healthy Homes Team did a wonderful job."

Team member Rob helped solve heating and electrical problems at Mr Pagden's home.

North Tyneside Council

**SAFE AND HEALTHY HOME**  
**IMPROVING YOUR HOME?**

North Tyneside Council's Safe and Healthy Homes Team offers advice and guidance to help residents solve housing issues and improve their health.

If you think your home needs our help, get in touch and we will arrange a convenient time to visit you to make an assessment.

Telephone (0191) 643 7585 or email: [healthyhomes@northtyneside.gov.uk](mailto:healthyhomes@northtyneside.gov.uk)

The level of support available will depend on individual circumstances.

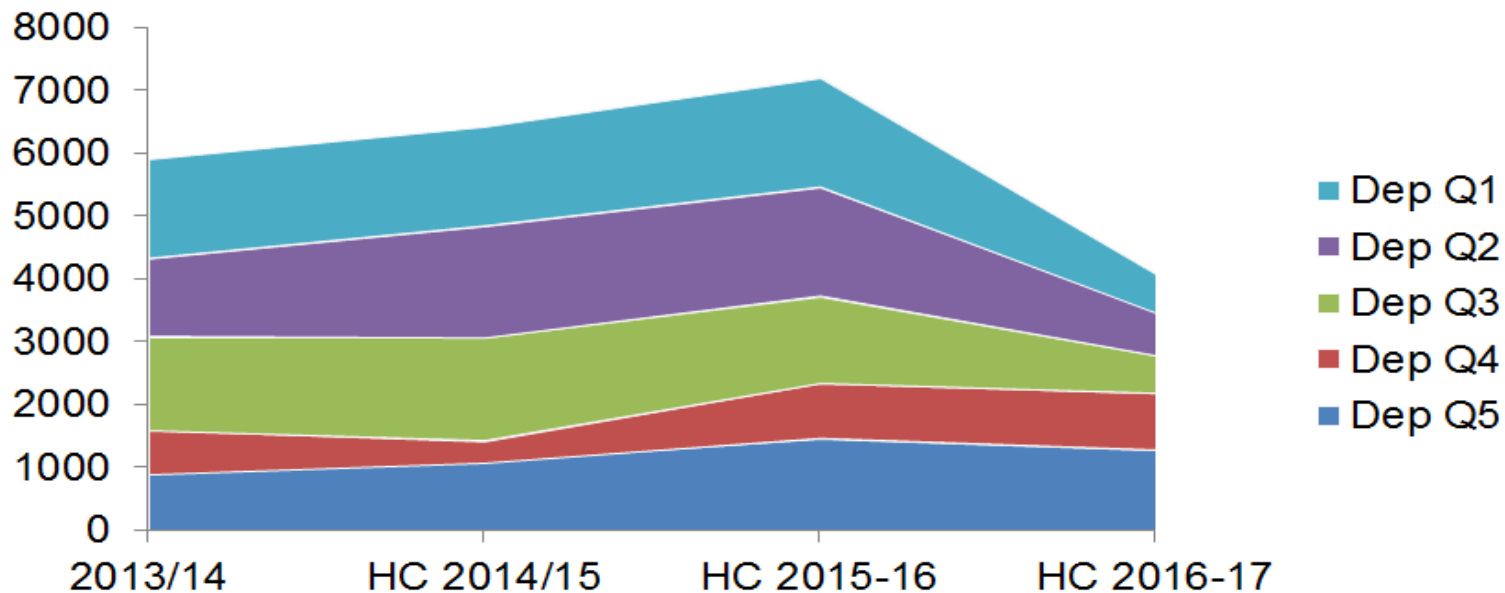
If you own your home, you are a social landlord, or you are a landlord, contact your own landlord.

Depending on what is needed, we can arrange for work to be carried out by fully qualified trades people, or refer you to relevant trusted local services.



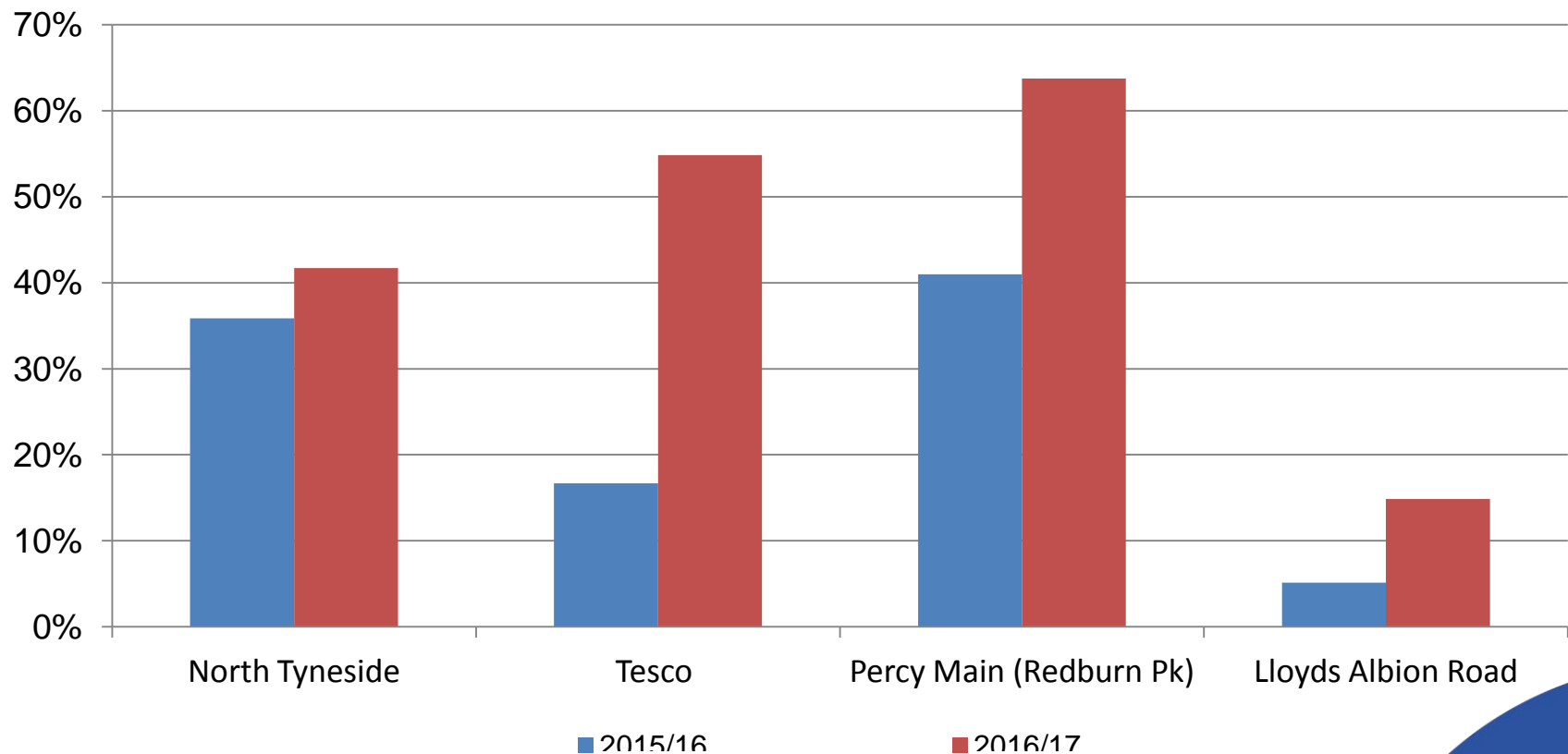
# Health

## No of Completed NHS Health Checks 2013 - 2017 by Quintile of Deprivation



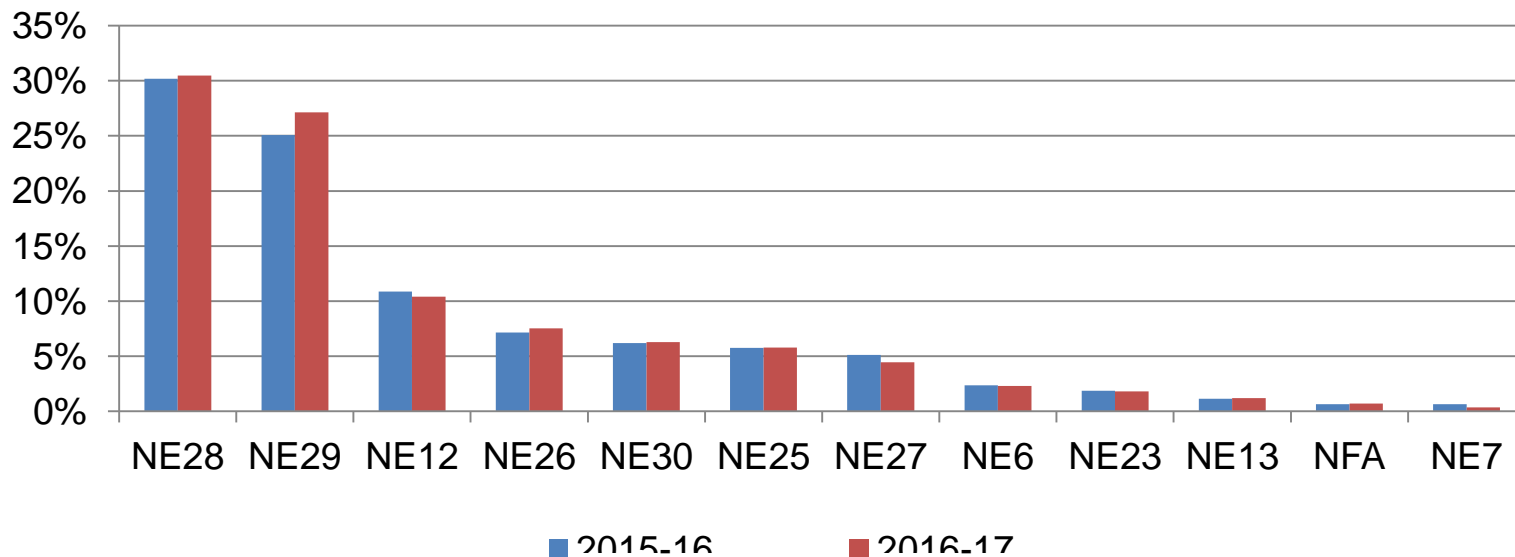
# Health

**Stop Smoking Quit Rates for North Tyneside and contracted Pharmacies within Chirton & Riverside for 2015/16 and 2016/17**



# Health

Proportion of clients in drug and alcohol treatment broken down by postcode of residence for 2015/16 and 2016/17



Thank you

