



The Joint Health and Wellbeing Strategy



Leicester
City Council

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PREFACE

TO BE ADDED ONCE INITIAL CONSULTATION PERIOD IS COMPLETE

Our Vision:

**“To give everyone the opportunity
to achieve and maintain good
mental and physical health over
the course of their life”**



INTRODUCTION

What is the role of this Health and Wellbeing Strategy?

The Joint Health and Wellbeing Strategy (JHWBS) is a strategy that will present the health priorities in Leicester. The Strategy will highlight several key areas that the Local Authority and Leicester's Health and Wellbeing Board will be focusing on over the next five years.

This strategy is a document that sets out an overarching plan to improve health and wellbeing of people in Leicester. It will influence the work of other key partners and can be used as a framework for the health challenges that need to be addressed in the city. The Strategy looks at health and wellbeing at a population level, through communities and demographics. As a result, individual health needs, inequalities, or experiences of healthcare will not be discussed in this work.

The Strategy is underpinned by an **Action Plan**. This document is aligned with objectives identified within this strategy and sets out actions that call for joint working. It also creates a framework for monitoring progress towards achieving our vision.

It must be noted that the strategy has been developed in a time of extreme financial pressure across all parts of the public sector. The principles and actions laid out in this Strategy and action plan will be better achieved if opportunities for collaborative work across different sectors are fully embraced. This may involve using existing assets to the community, such as community groups and voluntary sector organisations, as well as working with wider strategic partners.

This collaborative way of working may not be without challenges. However, we believe that working together to address health inequalities across Leicester is the best way to have a long-lasting, positive impact on the health of the city's residents.

The content of this strategy is based on several sources. These sources include the latest Joint Strategic Needs Assessment [JSNA] series, other key strategies and expertise from professionals across a range of different disciplines.



WHY DOES LEICESTER NEED A HEALTH AND WELLBEING STRATEGY?

There are significant health inequalities between different areas within Leicester. It is a city with many areas of deprivation, and the difference in health outcomes between the most and least deprived areas in the city is stark. There is a seven-year difference in life expectancy between men living in the most and least deprived areas of the city, and people living in the most deprived areas of Leicester will live more years in poor health. Closing the gap between these two groups can only be achieved by focusing on those in greatest need and looking at the many different factors that may influence their health.



The health behaviours that people adopt are framed and shaped by the wider environment that people are part of. This means that behaviours such as smoking, excessive drinking, drug use, poor diet and inactivity are greater in some areas of the city. These behaviours contribute to a shorter life expectancy overall and to the rates of heart disease, cancer and respiratory disease. These are the leading causes of death in the city.



Around 48,500 people in Leicester are multi-morbid, a term that means an individual is living with more than one long term physical or mental health condition. Locally, 25% of people living with diabetes have five or more additional health conditions, and 35% of those living with depression have three or more additional health conditions.





There is a clear link between people's mental and physical health. When a person is struggling with poor mental health, their physical health is likely to suffer too. People with poor mental health are more likely to engage with unhealthy behaviours and poor lifestyle choices, contributing to premature death. In Leicester it is estimated that between 34,000 and 38,000 people live with a common mental health problem, and around 3,400 people live with an enduring mental health condition.

It is estimated that around 30,000 people are socially isolated in the city. This impacts on people of all ages, particularly older people. However, this is growing increasingly common amongst younger people (16-24 years) as well. As Leicester has an ageing population this is particularly challenging for this age group. Social isolation has a direct negative impact on mental and physical health and can make existing health problems worse.



OUR APPROACH

This document is a call to action to tackle the origins of ill health in our communities; Marmot calls this 'the causes of the causes'. A focus on the wider determinants of health means that we consider the impact of the wider environment on people's health and wellbeing.

Greater access to health care services alone will not adequately address health needs or improve wellbeing. We need a holistic approach, one which considers the broad factors that determine a person's health and wellbeing. These include our unique characteristics, our communities and relationships. Figure 1 demonstrates how these factors interact.

Our strategy is to develop a sense of purpose which will help us to draw on existing assets and resources to protect health and wellbeing. This approach requires organisations and communities to work together to provide new, wide-ranging solutions to established, complex health problems.

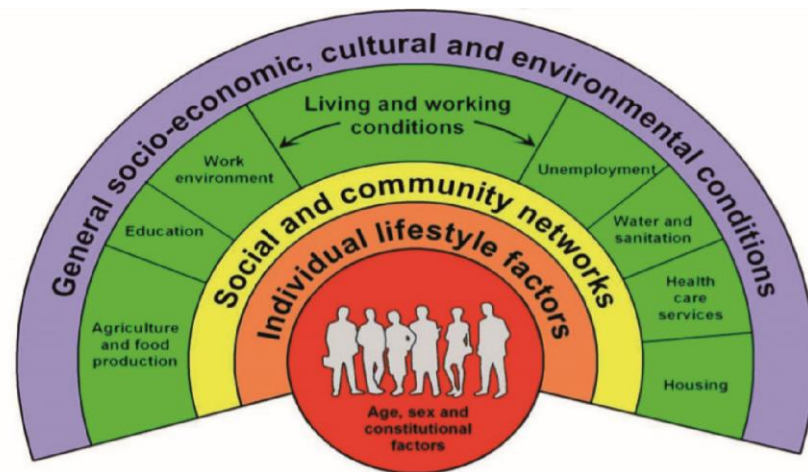


Figure 1 the Determinants of Health (Dahlgren and Whitehead 1992)

Therefore, our vision for this strategy is:

'To give everyone the opportunity to achieve and maintain good mental and physical health over the course of their life'



THEMES

The content of this Strategy uses a number sources, including:

- Leicester's Joint Specific Needs Assessments;
- Leicester Health and Wellbeing Surveys;
- Health Needs Neighbourhood Profiles
- The priorities and objectives set out by several existing strategies.

The Strategy has been shaped by stakeholder views expressed at the Strategy and Action Plan workshops. These helped to develop the following themes for health and wellbeing in Leicester:



Healthy Places

Healthy Minds

Healthy Start

Healthy Lives

Healthy Aging

HEALTHY PLACES

Ambition:

To make Leicester the healthiest possible environment in which to live and work

Why is it important to health?

The environments in which we live and work impact on our quality of life, our health and life expectancy. Healthy eating, regular exercise and active travel are easier choices when our environment is safe, our homes are comfortable, and our jobs are secure.

People living in urban environments, with air and noise pollution and lack of green spaces and mobility options generally have poorer health and lower than average life expectancy. The relationship between

employment and health is close. Being unemployed is rarely good for health, while secure occupations are linked to positive health, jobs which are insecure, low-paid and stressful can make people ill.

A healthy place promotes good health. It has green and open spaces, libraries and museums, the air is fit to breathe, and the houses are of a decent standard. A healthy place has a sense of community, neighborliness and connectedness.

Key issues affecting Leicester

People in the most deprived areas of Leicester live on average 7 years less than those who live in the least-deprived. Three out of four of Leicester residents live in communities that are among the 40% most deprived nationally.

The local Health and Wellbeing Survey (2018) reports that half of Leicester residents are concerned with air quality. It varies across the city, detrimentally impacting on the most deprived areas. Motor vehicles are the greatest contributor to atmospheric pollution locally. The most common form of transport to the city centre is by car (36%), followed by bus (31%) and

walking (25%), however, within the city centre itself more residents walk (35%) or ride a bike (8%).

Almost half the residents of Leicester either own their house or have a mortgage; 19% rent through either the Local Authority or Housing Associations. Most residents feel their accommodation meets their needs, though private and social renters have concerns their property is too small, in need of repairs, cold or damp (5%). One in five households in Leicester are overcrowded; this impacts on particularly people who are unemployed (35%) and who are private renters (28%).

Local surveys find that, in general, residents are satisfied with the areas where they live, though people who rent local authority homes are more likely to feel less satisfied with their area.

Most Leicester residents say they use parks, waterways, open or green spaces

once a week, and only 11% say they never use them. Half of Leicester residents feel safe in their local area after dark. Four in five people are satisfied with local green space, although people in some deprived areas report being much less satisfied.

Examples of what are we currently doing to improve people's mental health

❖ **Air quality**

- Promote sustainable transport across the city as a health benefit and to improve air quality

❖ **Standard of housing**

- Ensure all local authority housing meets decent home standards

❖ **Open and green spaces and waterways**

- Promote the health benefits of using local open, green spaces and waterways

Through this strategy, we will:

- Influence the environment to make healthier choices more accessible
 - Ensure decent homes are within the reach of every citizen
 - Improve air quality
- Develop and encourage healthy neighbourhoods and a sense of community

Details of specific actions that underpin these objectives can be found in the Action Plan.

HEALTHY MINDS

Ambition:

To promote positive mental health within Leicester across the life course

Why is it important to health?

Good mental health and wellbeing is vitally important, both for quality of life and overall life expectancy. Mental health problems, ranging from depression and anxiety to more complex mental health conditions affect a large proportion of people in Leicester. Suicide in Leicester largely follows the national average rate; however, it is still a major cause of early death in the city, particularly amongst middle-aged men.

There is a clear link between mental health and physical health. When a person is struggling with poor mental health, their physical health is likely to suffer too. This is partly because people with mental ill health are more likely to engage in risk taking behaviour, such as smoking, or drug and alcohol misuse. People with poor mental health are also more likely to have a poor diet and have lower levels of physical activity.

People with both poor mental and poor physical health may not receive appropriate treatment for their physical health problem. This may be for a variety of reasons, such as GPs only being given enough time to treat one issue that the patient presents with. Stigma experienced by people with a mental health condition may also make them less likely to access healthcare in general for fear of judgement, be that for a physical or mental health problem. Stigma and discrimination lie at the root of many problems that people with a mental health problem may experience. To address them, there is a need for parity of esteem between mental and physical health problems.

Social isolation and loneliness are becoming an increasing challenge in communities. There are clear links between loneliness and poor mental and physical

Key issues affecting Leicester

It is estimated that between 34,000 and 38,000 people in Leicester have a common mental health problem and around 3,400 people have a more complex mental illness, such as schizophrenia. A high number of people in the city are admitted to hospital or receive emergency care for poor mental health, but enduring improvements in mental health remain poor.

Leicester has areas with high levels of deprivation and people living in these areas are more likely to experience poor mental health. The Health and Wellbeing survey found that people who are aged 20-24 or 25-34, men, BME residents, working age adults and people who do not work due to sickness or disability are likely to report their mental health as being 'poor' in comparison to other groups. People

reporting poor mental health are also less likely to be satisfied with the area that they live in, and less satisfied with the green space in the city. They are less likely to receive the well-established physical and mental health benefits of accessing green space in the city.

People with poor mental health are less likely to engage in protective behaviours that benefit their mental and physical health. They are less likely to do the recommended amount of weekly exercise,

less likely to eat five a day, and more likely to smoke and drink than residents reporting good mental health. This puts them at greater risk of poor physical health.

People reporting poor mental health are more likely to run out of money by the end of the month which may lead to economic exclusion. Social isolation and loneliness is also higher amongst people amongst this cohort, which suggests that people with a mental health problem may feel less connected to their local community.

Examples of what are we currently doing to improve people's mental health?

- ❖ **Suicide prevention and support**
 - Developing a campaign entitled 'Start a Conversation: Suicide is Preventable' to convey that small actions can save lives
- ❖ **Support positive mental health amongst children and young people**
 - Working towards all schools in Leicester, Leicestershire and Rutland providing emotional resilience training by 2021
- ❖ **Using cultural assets to support the mental health of local people**
 - Encouraging a greater use of parks, open spaces and waterways to support people's mental health.
- ❖ **Changing stigmatising behaviour and attitudes around mental health problems**
 - Working to spread a wider awareness of mental health across the city, through the Time to Change Leicester campaign

Through this strategy, we will:

- Support positive mental health among children and young people
- Improve resilience to mental health problems among working age adults
 - Promote zero suicides in Leicester

Details of specific actions that underpin these objectives can be found in the Action Plan.

HEALTHY START

Ambition:

Give Leicester's children the best start in life

Why is it important to health?

Having the healthiest possible start in life is of great importance. How we start our lives has a huge impact on our future quality of life, and our life expectancy. This stage of life sets the scene for how our mental and physical health will be in the future.

Many things impact on a child's health, such as the level of deprivation in the area they grow up in, the education they receive, and the influence of their family and peers. One of the most important influences is the health and lifestyle choices of the mother during pregnancy, and the family environment when their child is born. These issues in particular are important in terms of reducing infant mortality and in influencing the lifestyle behaviours of the child.

Other important issues such as encouraging breastfeeding, ensuring that the child receives immunisations, maintains a healthy weight, has good oral health and engages in exercise during their childhood are also key areas to consider. It is also important to support children and young people to have positive mental health and to feel confident from a young age.

In addition, we need to recognise that new technologies may have an impact on children's health and wellbeing. These could be emerging issues such as the impact of screen time on the levels of physical activity a child does, or the impact of social media on mental health and wellbeing

Key issues affecting Leicester

Compared to other cities in the UK, Leicester is a 'young city'. It is estimated that 41% of young people aged 0-15 live within the 20% most deprived areas nationally. Children in deprived areas are more likely to have poor mental and physical health compared to their peers.

Infant mortality, particularly Sudden Infant Death Syndrome, is high in Leicester, particularly in deprived areas. Certain lifestyle choices of the expectant mother (such as smoking, excessive drinking, or

substance misuse) are a risk factor for infant mortality and illness. Protective behaviours such as breastfeeding and providing childhood immunisations reduce infant mortality, but the rates for both of these remain low in Leicester. Children's oral health is steadily improving, but it continues to be a challenge in the city.

Maintaining a healthy weight is important for children. The National Child Measurement Programme shows that 20% of Reception age children and 37% of Year

6 children in the city are overweight or obese. Encouraging children and young people to participate in protective behaviours such as exercise, and making healthier eating choices, is a crucial element of encouraging children to maintain a healthy weight.

The 2017 JSNA for Children in Leicester suggests that there are around 2,000 children aged five to ten living with a mental health problem. On average, half of these will be conduct disorders, such as ADHD, and emotional disorders, such as

anxiety, are also common. Autism Spectrum Disorder affects a small proportion of children in Leicester and affects around 1% of all children in Leicester. Diagnosis of ASD is mainly seen in boys.

A crucial part of maintaining good mental health is providing an environment for children to develop good social skills and confidence in themselves, and timely diagnosis for children who may be suffering from a mental health problem.

Examples of what are we currently doing to improve children's health?

❖ Reducing infant mortality

- Reducing the risk factors of infant mortality

❖ Physical activity/sports

- Encouraging each school in Leicester to participate in the Daily Mile initiative

❖ Oral Health

- Developing a programme in nurseries and schools to promote good oral health, under the Healthy Teeth, Happy Smiles logo

Through this strategy, we will:

- Help women and their families to experience a healthy pregnancy
 - Work with new parents to provide a healthy start for babies
- Support families and caregivers to influence and practice positive health behaviours with children
- Provide children with good conditions which enable them to learn and develop

Details of specific actions that underpin these objectives can be found in the Action Plan.

HEALTHY LIVES

Ambition:

Encourage people to make sustainable and healthy lifestyle choices

Why is it important to health?

Leading a healthy life as long as possible is important, as it helps to improve our quality of life and life expectancy. Lifestyle choices such as smoking, excess drinking of alcohol, poor diet and a lack of exercise contribute to around 40% of premature deaths in the city. The consequences of poor health choices in middle age may also have a negative impact on health in later life.

Living a healthy lifestyle also reduces the risk factors associated with developing long term mental and physical health conditions. It is also a way for people with chronic health conditions to manage these well and prevent their health from becoming worse. This is important for people who are multimorbid, meaning that they suffer with one or more long term chronic illness.

There are many wider factors that have an influence on a person's health, such as employment, a sense of purpose and having meaningful social connections. Worklessness can contribute to poor physical and mental health, and people who are workless can sometimes engage in unhealthier and less protective behaviours than people who are working. Having access to cultural resources, such as art or theatre, and opportunities for learning outside of work both help overall health and wellbeing, as they generate a sense of purpose. Feeling included in the local area and community through things like strong relationships with friends, family and faith groups is also key to good health throughout our lives.

Key issues affecting Leicester

The three leading causes of death in Leicester are cardiovascular disease (CVD) (accounting for 28% of deaths), respiratory disease (14%) and cancer (24%). Statistics show that people living in deprived areas are more at risk of developing these conditions in their lifetime. Other chronic conditions, particularly diabetes, are also a challenge in Leicester. 28,000 people are currently diagnosed with diabetes, but there are an additional 30,529 people who are thought to have the condition and are undiagnosed. The number of people who are living with

more than chronic illness is increasing, particularly amongst people.

Lifestyle factors can have a big impact on these conditions. The local Health and Wellbeing Survey suggests that a high proportion of people in the city are likely to be overweight or obese. Amongst people who drink alcohol, 9% drink over the recommended limit. The survey also shows that only 21% of people eat the recommended five portions of fruit and vegetables per day, which is lower than the national average of 26%. The amount of exercise people engage in has increased since the 2015 survey, but not amongst

people who are unemployed, disabled or are in poor health.

Unemployed people are more likely to self-report that they have 'poor' mental and physical health. They are also more likely to smoke, less likely to exercise and more likely to run out of money before the end of the month. This group, along with disabled people and people with a long-term illness, are recorded as experiencing increasing amounts of financial difficulty, being worse off in 2018 than they were in 2015. The lifestyle choices that are seen in this group could be linked to economic precarity, and

the nature of many health activities having a high cost, such as gym memberships or the cost of fresh produce. Exclusion from expensive activities may also contribute to social isolation and loneliness.

Most people in the city are satisfied with the area they live in, but levels of giving back to the community through volunteering in the city are low (17% vs 23% nationally).

Examples of what we are currently doing to help people live a healthy life?

- **Preventing cardiovascular disease**
 - Encouraging people, who are eligible, to have an NHS health check
 - Working as part of the Cities Changing Diabetes programme, to raise awareness of the condition, improve care and timely access to diagnosis
- **Preventing respiratory diseases**
 - Supporting people to reduce or stop smoking, through the work of the prevention team.
- **Reducing risk factors for chronic illnesses or cancer**
 - Encouraging more people to become physically active for low or no cost, through initiatives such as promoting Active Leicester.

Through this strategy, we will:

- Increase the number of people engaging in protective behaviours
- Address the prevalence and management of chronic conditions
- Support an increase in accessing lifelong education and good quality employment
- Take steps to reduce social isolation and loneliness amongst people living in the city

Details of specific actions that underpin these objectives can be found in the Action Plan.

HEALTHY AGING

Ambition:

Enable Leicester's residents to age comfortably and confidently

Why is it important to health?

In modern society 'age' can be less about chronology and more to do with subjective health and wellbeing; about how we feel. Healthy Aging is our commitment to longer life expectancy and a better quality of life for older people in Leicester.

As people live longer, retirement becomes more important. Protecting health and wellbeing means supporting older people to have a continued sense of purpose; to be able to share their expertise, to do something new, to volunteer and give back to society. It also means supporting people through bereavement, those at risk of poverty and helping people that are frail to get the additional help and support they need.

Healthy aging is also about equalities. As discrimination against the elderly is common, so age is a protected characteristic. Many older people suffer double discrimination, for example women and people from minority groups.

About 40% of people aged over 65 have a limiting long-term health condition and are at increased risk of developing sensory

impairments such as loss of vision. Cognitive impairment is a factor, and there needs to be an effective care pathway to promote early diagnosis of, and effective support for, people with dementia. This means that older people need appropriate, timely access to the support they require to stay independent for as long as possible.

Supporting older people to manage their wellbeing can be about promoting good lifestyle choices such as a healthy diet, fluid intake, exercise, oral health, flu vaccination and regular health checks.

Maintaining good mental health in old age means helping people to cope with social isolation and loneliness. This can be complicated by issues such as the move to digital access to services which, while helping people to stay connected, can be a source of anxiety and vulnerability.

Many older people support others by being carers, providing childcare or financial support. While this can help people with a sense of purpose, it can also have a detrimental impact on health and wellbeing.

Key issues affecting Leicester

While people in Leicester are increasingly living longer, on average men will spend 17 and women 23 of those years in poor health. In addition, 7,000 people in the city are classed as being frail or have 5 or more chronic health conditions.

The onset or progress of some health-related conditions can be influenced by lifestyle factors. The local Health and Wellbeing Survey notes that residents over

the age of 65 were less likely to smoke and had better mental wellbeing than younger counterparts but that they have a higher risk of obesity, exercise less and drink more alcohol than is recommended.

Health services and some local authority settings are moving towards digital platforms and away from traditional forms of communication. While many adult social care service users

benefit from this, the Health and Wellbeing Survey shows that people over 65 reject the use of technology such as apps to improve their health even when recommended by a GP. Taken together these show the risks to the quality of life for many older people.

Around 3,000 people are diagnosed with dementia in Leicester, of which 97% are aged over 65, and around 3,000 have a sight loss or visual impairment. These

conditions make it difficult for people to travel independently or access cultural and leisure facilities. Living with a visual or hearing impairment or with dementia can exacerbate a person's feelings of loneliness and isolation, which in turn often leads to depression and other physical or mental health conditions. It is estimated that between 4,500 and 8,000 older people in Leicester suffer from depression or severe depression.

Examples of what are we currently doing to promote healthy aging?

- **Managing dementia in the community**
 - Creating 'dementia friendly' public spaces
- **Working towards managing the health of multimorbid people**
 - Delivering the frailty pathway
- **Empowering older people to live independent lives for longer**
 - Embedding a model of support that promotes wellbeing, self-care and independence

Through this strategy, we will:

- Support older people to have good wellbeing and feel safe in their own homes
- Encourage older people to utilise and engage with their local communities
 - Help older people to manage and protect their health

Details of specific actions that underpin these objectives can be found in the Action Plan.



ENGAGEMENT AND CONSULTATION

Consultation surrounding the Health and Wellbeing Strategy and Action Plan has occurred in three ways:

- Public Health ran a series of five workshops, for each of the five main themes of the Strategy. Stakeholders, partners, and professionals from a range of organisations were invited to make suggestions for improving health and wellbeing in each area.
- The aims and objectives were developed by engaging with authors of existing strategies and plans that

relate to the wider determinants of health and wellbeing.

- An engagement roadshow was carried out with several partners to raise the awareness of the strategy, and to give the opportunity to comment and input on a draft version.

The Strategy document and Action Plan has also gone through a public consultation period, which gave organisations and members of the public an opportunity to engage with the document and make comment.

DELIVERY AND MONITORING

- The city's **Health and Wellbeing Board** is responsible for ensuring that there is a health and wellbeing strategy. The content of this strategy will help provide focus and direction for the work of the board.
- This strategy will have **an action plan** that sits behind it to drive collaborative working and progress. This will contain objective measures to monitor advancement of each theme. It will also hold development objectives that are less tangible and difficult to quantify but will evidence its contribution to positive health wellbeing in the city through other means.
- Overall the **monitoring and delivery** will be supported by subgroups reporting to the health and wellbeing board

