

Haringey's Draft Health and Wellbeing Strategy

2012-2015

CONSULTATION

20th September – 20th December 2011







Foreword

We believe that everyone has the right to enjoy good health. However, many of our residents don't have this opportunity and there are large health inequalities across the borough. Residents in the poorest parts of Haringey are not only more likely to die prematurely, but they will also spend a greater proportion of those shorter lives unwell. We understand that to reduce these health inequalities we need to focus not only on health, but also on the wider determining factors by decreasing poverty and deprivation.

We know we face real challenges in overcoming these deep-seated issues, but we must all be ambitious in our thinking and in our desire for change. Through the Health and Wellbeing Board we aim to enhance joint working and fresh approaches. We know it's going to be increasingly difficult, but the benefits are substantial.

We continue to make significant investment in improving health and wellbeing locally, and as a result we have a lot to be proud of. Teenage pregnancy has reduced; there has been a steady decline in deaths of babies under one year old; women's life expectancy is on a par with England; and educational attainment has continued to rise throughout the borough. This strategy sets out how we want to build on these successes over the next three years, working in partnership across Haringey and moving further towards the goal of good health and wellbeing, something that every resident can aspire to and enjoy.

Good health and wellbeing is in everyone's interest, is everyone's responsibility, and requires everyone to play their part.

This consultation is an opportunity for you to tell us how you think we can reduce health inequalities in Haringey and where we should target our resources. I encourage you all to have your say.

Councillor Dilek Dogus

Cabinet Member for Health and Adult Services

Dr Helen Pelendrides

Chair, Haringey Clinical Commissioning Group

Haringey's Health and Wellbeing Strategy

Haringey's Health and Wellbeing Strategy sets out our commitment and approach to tackling health inequalities and promoting health and wellbeing locally. Our priorities have been set in response to the issues we face, which are most starkly demonstrated by the gap in life expectancy between different parts of the borough.

Through the implementation of this strategy, we will seek to achieve real and measurable improvements in the health and wellbeing of residents by investing in prevention and early intervention activities, and providing a coordinated approach to ensure that all of our activities contribute towards health improvements and reduce inequalities.

The vision of the strategy is:

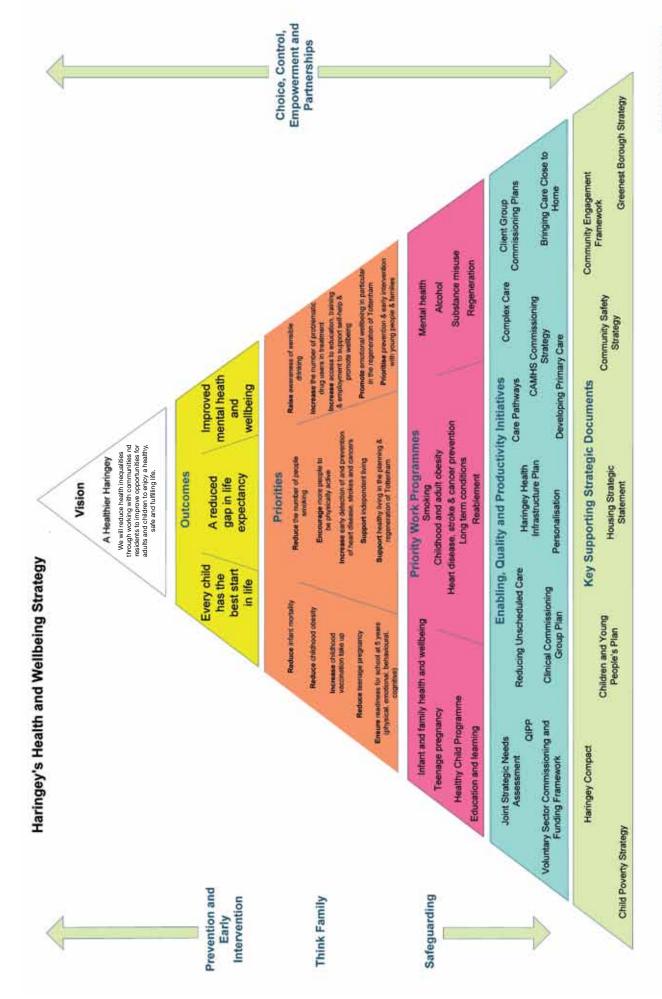
A Healthier Haringey

We will reduce health inequalities through working with communities and residents to improve opportunities for adults and children to enjoy a healthy, safe and fulfilling life.

Our three outcomes are:

- 1. Every child has the best start in life
- 2. A reduced gap in life expectancy
- 3. Improved mental health and wellbeing

A Healthier Haringey



Outcome one

Every child has the best start in life

Outcome two

A reduced gap in life expectancy

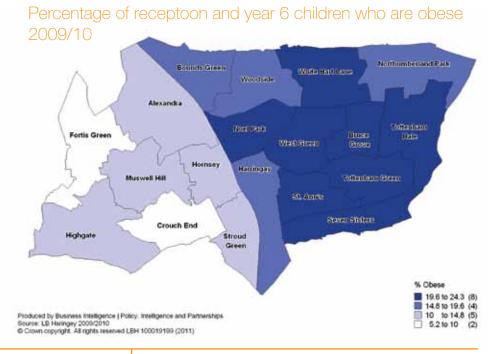
Outcome three

Improved mental health and wellbeing

What we know about Haringey

- Approximately five in every 1,000 babies die before their first birthday, higher than both the London and England average.
- Although the number of teenage pregnancies is falling locally, levels remain higher amongst mixed White and Black Caribbean communities.
- Black African women and those aged under 20 tend to book late for maternity care.
- Breastfeeding rates are considerably lower in the east of the borough.
- Vaccination rates have increased, but remain below the level required to protect the local population.
- One in four children is either overweight or obese when they start school. By year six this increases to nearly 40%, with obesity levels at 10.9% for White British children and 28.2% for Black African children.

• There are differences in attainment at Early Years Foundation Stage (birth to five years old) between different ethnic groups. 86% of White British children are scoring 6 or more on personal, social and emotional development, compared to 61% African, 55% of Caribbean, 53% Turkish and 39% Kurdish children.



Research shows

- By the age of ten a child from a poorer background will have lost any advantage of intelligence indicated at 22 months; whereas a child from an affluent family will have improved his or her cognitive scores purely because of his/her advantaged background.
- Smoking or exposure to smoke in pregnancy increases the risk of premature birth and low birth weight. Almost half of all teenage mothers smoke during pregnancy.
- Higher teenage pregnancy rates are linked to poverty and low educational attainment.
- Breastfeeding improves the health of babies.
- Vaccination and immunisation programmes are essential to the wellbeing of our communities.
- Overweight or obese children and young people often have easy availability to low cost, high fat and sugary food and drink.

What we plan to do

- Provide targeted support for the welfare, learning and all round development of children ensuring they make good progress from conception to 3 years so that they are ready for school at 5 years.
- Encourage pregnant women to give up smoking.
- Increase early access to ante-natal and postnatal support especially for Black African women.
- Promote breastfeeding.
- Raise awareness and take up of vaccinations
- Promote a healthy and balanced diet for families.
- Reduce the barriers to and increase opportunities for taking up physical activity amongst children.
- Provide targeted, relevant and accessible sex and relationship education to children and young people.

Outcome two

A reduced gap in life expectancy

Outcome one

Every child has the best start in life

Outcome three

Improved mental health and wellbeing

What we know about Haringey

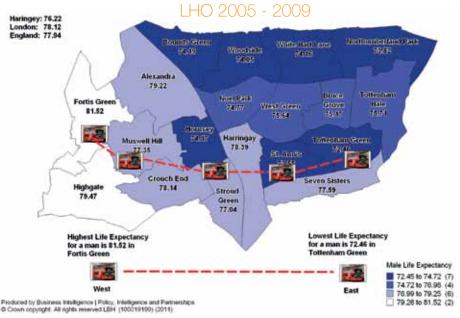
- Life expectancy is rising generally, in line with national trends, but there remains a nine year difference between men living in the east (72.5 years in Tottenham Green and those living in the west (81.5 years in Fortis Green) of the borough.
- The gap in life expectancy is mainly due to heart disease, stroke,

cancer and lung disease.

- Around 28.6% of men and 24.2% of women smoke compared with 25.3% and 18.8% respectively for London.
- Alcohol related hospital admissions rates have almost doubled in the period 2004/05 -2008/9 for men and women.
- Over 50% of men and about 40% of women in Haringey were overweight or obese.

- Heart and respiratory disease are the top two causes of death for people with learning disabilities
- Around 5,743 adults aged 18+ are using social care services; by far the largest group is women aged 65+ reflecting that women live longer than men.





Research shows

- Smoking, poor diet, lack of exercise, alcohol misuse and obesity are risk factors for heart disease, stroke and cancers. These risk factors are more common in deprived areas.
- Obesity has more than doubled in the UK in the last 25 years and nearly a quarter of adults are obese. People who are obese die on average 9 years earlier than those who are not.
- Children who grow up in homes where there is alcohol, nicotine or drug abuse may be more likely to develop addictions.
- Heart disease is more common in lower socio economic groups, in certain black and minority ethnic groups and in people with learning disabilities.
- Giving people more choice and control over the support they need helps them to live longer, healthier lives.
- The more hours of care an unpaid carer provides, the more likely it is that they will be in poor health. This is particularly so for those providing more than 50 hours a week (21% of carers).

What we plan to do

- Protect families and communities from tobacco.
- Motivate and assist every smoker to guit.
- Extend identification and brief interventions programmes to minimise the harm caused by alcohol misuse.
- Reduce the barriers to and increase opportunities for taking up physical activity amongst adults.
- Raise awareness of heart disease, stroke and cancer, and increase take up of screening programmes, with a particular focus on men aged 40+ in the east of the borough.
- Increase the number of health checks and health action plans for people with learning disabilities.
- Promote independent living for vulnerable adults and support those who care for them.
- Promote healthy living in the planning and regeneration of Tottenham.

Outcome three

Improved mental heath and wellbeing

Outcome one

Every child has the best start in life

Outcome two

A reduced gap in life expectancy

What we know about Haringey

- Haringey is one of the most diverse boroughs in London and black and minority ethnic groups are more likely to experience mental health issues.
- Many people with severe and enduring mental health problems live in the east of the borough (Bounds Green, Woodside, St Ann's

and Tottenham Green). Late diagnosis is common in the east of the borough.

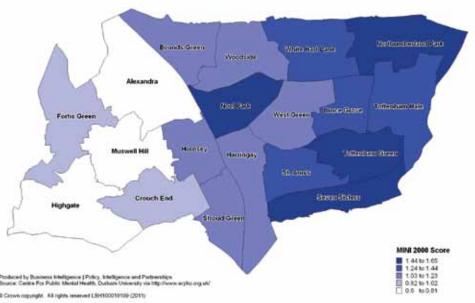
east of the borough.

Haringey has a young

- Haringey has a young population with high rates of drug and alcohol misuse and unemployment which are linked to mental ill health.
- There are an estimated 2,452 children aged 5-16 with mental health problems which is estimated to increase by 8% by 2013.

- 6.29% of residents over the age of 65 were estimated to suffer from dementia in 2008.
- The recent Tottenham disturbances will have an impact on the wellbeing of communities in the east of the borough.

MINI2000 (Mental Illness Needs Index)



Research shows

- 1 in 6 people in England suffer from a common mental health problem like depression or anxiety.
- 1 in 200 people have a serious mental illness like psychosis (where people may experience hallucinations or delusions).
- There is a strong link between physical and mental health. People with poor physical health often have poor mental health and vice versa.
- Common mental health problems for people with learning disabilities include: anxiety disorders, depression and schizophrenia.
- Poor mental health and wellbeing can impact on every aspect of life including physical health, education, employment and social functioning.
- Early diagnosis leads to improved mental health and wellbeing.

What we plan to do

- Raise awareness of sensible drinking to minimise the harm caused by alcohol misuse.
- Increase the number of problematic drug users in effective treatment.
- Improve access to education, training, employment and housing particularly increasing opportunities for young people and those with mental health problems including people with learning disabilities.
- Increase access to information and resources about mental health services to support selfhelp to promote wellbeing.
- Promote the inclusion of emotional wellbeing in community development initiatives, in particular the work to regenerate Tottenham.
- Prioritise prevention and early intervention by working with schools, young people and families to provide accessible non-stigmatising services in local community based settings.

We are keen to hear what you think of our plans to improve the health and wellbeing of people locally.

Tell us to what extent you; agree with our vision; support our aspirations; have other ideas of how we can improve people's health and wellbeing; and how you or your organisation can help turn our aspirations into reality.

Complete the questionnaire online at www.haringey.gov.uk/hwbstrategy

Alternatively, you can return this version by post:

Policy, Equalities and Partnerships 7th Floor, River Park House London Borough of Haringey Freepost RRJG-YJBH-UCRZ London N22 8HQ

Please return your completed questionnaire by 20th December 2011.

Vision	Strongly agree	Agree	No opinion	Disagree	Strongly disagree	If you disagree, please say why
A Healthier Haringey: We will reduce health inequalities through working with communities and residents to improve opportunities for adults and children to enjoy a healthy, safe and fulfilling life.						

Aspirations	Strongly agree	Agree	No opinion	Disagree	Strongly disagree	If you disagree, please say why
Outcome 1						
1. Give every child the best start in life						
1.1 Provide targeted support for the welfare, learning and all round development of children ensuring						
they make good progress from conception to 3 years so that they are ready for school at 5 years						
1.2 Encourage pregnant women to give up smoking						
1.3 Increase early access to ante- natal and post-natal support especially for Black African women						
1.4 Promote breastfeeding						
1.5 Raise awareness and take up of vaccinations						
1.6 Promote a healthy and balanced diet for families						
1.7 Reduce the barriers to and increase the opportunities for taking up physical activity amongst children						
1.8 Provide targeted, relevant and accessible sex and relationship education to children and young people						
1.9 Is there anything else you would like to see included in the strategy to help us achieve this outcome?	Add your c	Add your comment here	φ			

Ask	Aspirations	Strongly agree	Agree	No opinion	Disagree	Strongly disagree	If you disagree. please say why
ō	Outcome 2						
2. F	2. Reduce the gap in life expectancy						
2.1	Protect families and communities from tobacco						
2.2	Motivate and assist every smoker to quit						
2.3	l						
	interventions programmes to						
	minimise the narm caused by alcohol misuse						
2.4	Reduce the barriers to and						
	increase opportunities for taking up						
	physical activity amongst adults						
2.5	Raise awareness of heart						
	disease, stroke and cancer, and						
	increase take up of screening						
	programmes, with a particular						
	focus on men aged 40+ in the						
	east of the borough						
2.6	Increase the number of health						
	checks and health action						
	plans for people with learning disabilities						
0	1						
.,							
	those who care for them						
2.8	l						
	planning and regeneration of Tottenham						
2.9	· .	Add your c	Add your comment her	e e			
	to neip us acnieve triis outcome?						

Asp	Aspirations	Strongly agree	Agree	No opinion	Disagree	Strongly disagree	If you disagree please say why
ō	Outcome 3						
we.	 Improve mental health and wellbeing 						
3.1	Raise awareness of sensible drinking to minimise the harm caused by alcohol misuse						
3.2	Increase the number of problematic drug users in effective treatment						
e	Improve access to education, training, employment and housing particularly increasing opportunities for young people and those with mental health problems including people with learning disabilities						
3.4	Increase access to information and resources about mental health services to support self-help to promote wellbeing						
3.5	Promote the inclusion of emotional wellbeing in community development initiatives, in particular the work to regenerate Tottenham						
3.6	Prioritise prevention and early intervention by working with schools, young people and families to deliver services in local community based settings						
3.7	3.7 Is there anything else you would like to see included in the strategy to help us achieve this outcome?	Add your c	Add your comment her	φ			

	in Haringey?
You:	
Orga	inisation:
Eq	ualities monitoring
moni	ng personal questions can help us to improve the services we deliver to the community. If by toring we discover that certain groups of people aren't using particular services, we can address this sure equal access is given to all our residents.
5.	Some questions about you or your organisation
5.1	Please tell us who you are
	I represent a statutory organisation. Which one?
	I represent a voluntary and community organisation. Which one?
	I am local resident. Post code area (e.g. N8)
	,

How might you and/or your organisation contribute towards improving health and wellbeing

4.

5.2 About you

1. AGE

What is your age gro	up?		
0-4	12-15 🔲	25-29 🗆	65-75
5-7	16-17 🔲	30-44 □	75-84
8-9 🔲	18-19 🔲	45-59 □	85-89
10-11 🗖	20-24 🔲	60-64 🗖	90 and over □
2. ETHNICITY	/		
What is your ethnic g	roup? (Please tick o	one box from the appropria	te section)
White British		Irish	
White other			
Greek/Cypriot		Irish Traveller	
Turkish		Turkish/Cypriot	
Gypsy/Roma		Kurdish	
Other			
Please write in:			
Mixed White and Black Carib	bean □	White and Black African	
White and Asian			
Other			
Please write in:			
Asian or Asian British	1		
Indian		Pakistani	
Bangladeshi		East Asian African	
Other			
Please write in:			
Black or Black British Caribbean	າ □	African	
Other			
Please write in:			
Chinese or other ethic	nic group □		
Other			
Please write in:			

3. DISABILITY

Under the Disability Discrimination Act (DDA), a person is considered to have a disability if she/he has a physical or mental impairment which has a substantial and long-term adverse effect on her/his ability to carry out normal day-to-day activities. This includes people with HIV, cancer and multiple sclerosis (MS).

Do you have any of the following conditions which have lasted or expected to last for at least

12 months?						
Deafness or par	tial loss o	f hearing				
Blindness or par	tial loss o	of sight				
Learning disabili	ity					
Developmental of	disorder					
Mental health						
Long term illnes	s, disease	e or condition				
Physical disabili	ty					
No disability						
Other disabilities	3					
Please write in:						
4. SEX						
Please tick the	box that	best describes	you:			
Male □		Female 🗆				
5. GENDE	ER RE	EASSIGNN	MENT			
a) Does your ge	ender dif	fer from your bir	th sex?	Yes □	No □	
b) Are you unde	ergoing a	sex change?		Yes □	No □	
6. RELIGI						
Do you have a re	eligion or	belief that you w	ould like to	mention?		
If so, please tick	the appr	opriate box.				
No Religion		Jewish				
Christian		Muslim				
Buddhist		Sikh				
Hindu		Rastafarian				
Other						
Please write in:						

7. SEXUAL ORIENTATION

now would you describe your sexual orientation?									
Heterosexua	al 🗆	Bisexual		ay □	Lesb	ian □			
8. PRE	GNANC	CY AND) MATER	NITY					
Are you pre	gnant?			Yes 🗆		No □			
Do you hav	e a baby un	der 12 mor	nths old?	Yes □		No □			
9. MAF	RRIAGE	AND C	DIVIL PAF	RTNEP	RSHIP				
Are you: a) Married?				Yes □		No 🗆			
b) In a same	e sex civil pa	artnership?		Yes □		No □			
c) Co-habit	ing?			Yes 🗆		No □			
d) Single?				Yes □		No □			
10. RE	FUGEE	S AND	ASYLUN	Л SEE	KERS				
Are you a re Refugee	efugee or as	sylum-seek	er?	Yes □		No 🗆			
Asylum-see	ker			Yes 🗆		No □			
What counti	ry or region a	are you a ref	fugee/asylum s	eeker fron	n?				
11. LAI	NGUAC	àE							
Please tick t	the box whic	h best desc	ribes your land	guage.					
Albanian		Arabic		English					
French		Lingala		Somali					
Turkish									
Other									
Plassa write	in:								

Thank you very much for completing this questionnaire; your views will help us shape the future of the health and well being of Haringey.

What we will do next

Your views will be used to produce the final version of the Health and Wellbeing Strategy. The completed strategy will be launched in March 2012. You will be able to download copies from www.haringey.gov.uk

If you want this in your own language please tick the box, fill in your name and address and send to the freepost address below Kurdî Shqip Ku hun wena la zîmanixa daxwâzin. Nëse dëshironi ta keni këtë në gjuhën Lewira îflaret bîkin Navixa û navnîflanaxa tije tuaj, ju lutemi vendosni shenjën ✓ në kuti, bikin â biflenin ê navniflana jêr la vepêre. shënoni emrin dhe adresën tuaj dhe niseni me postë falas në adresën e mëposhtme. **Português** Se desejar receber o folheto na sua إذا كنت تود هذا الكتيب بلفتك، فالرجا وضع علامة على المربع، própria língua, por favor assinale a واكتب إسمك وعنوانك وارسلهما بالبريد المجانى إلى العنوان quadrícula, preencha com o seu nome e الميين بأسفل morada e envie para o endereço 'freepost' (com porte pago) abaixo indicado. Limba română বাংলা Dacă doriți un exemplar al broșurii în আপনি যদি এটা আপনার নিজের ভাষায় পেতে চান limba dvs. maternă, vă rugăm să bifați caseta তবে অনুগ্রহ করে সঠিক বাক্সে টিক দিন, এবং আপনার নাম corespunzătoare, să ne dați numele și ঠিকানা লিখে নিচের ঠিকানায় পাঠিয়ে দিন, এর জন্য কোন adresa dvs., și să trimiteți formularul la ডাকটিকিট লাগবে না। adresa de mai jos, fără timbru poștal. Français Soomaali Pour recevoir ces informations dans votre Haddii aad kan ku rabto afkaaga fadlan langue, veuillez cocher la case, inscrire vos xarriijin ku dhig sanduuqa yar, ku qor magacaaga iyo cinwaankaaga oo markaas nom et adresse et nous renvoyer ce formuu dir cinwaanka boosta lacag la'aanta ah ee laire, sans affranchir, à l'adresse ci-dessous. hoos ku goran. Türkçe Ελληνικά Bu kitapçığın Türkçe'sini istiyorsanız, Αν θέλετε αυτό το έντυπο στη γλώσσα σας, παρακαλούμε σημειώστε το τετράγωνο, kutuyu isaretleyip, adınızı-soyadınızı, adresinizi συμπληρώστε το ονοματεπώνυμο και τη yazdıktan sonra, lütfen bunu posta pulu διεύθυνσή σας και στείλτε το στην παρακάτω yapıştırmadan aşağıdaki adrese gönderin. διεύθυνση χωρίς ταχυδρομικό τέλος. Please tell us if you would like a copy of this document in another language that is not listed above or in any of the following formats, and send the form to the Freepost address below. easy Words In large print On audio tape In Braille land In another language, please state:

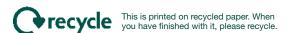
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Health and Wellbeing Consulation

Tel:

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Name:

Address: