Health Inequality in Wandsworth: Turning Aspiration into Reality

Director of Public Health Annual Report 2020





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Foreword



This is my first Director of Public Health Annual Report for Wandsworth and I am genuinely excited about its completion and publishing. Although Wandsworth is a thriving and diverse London borough which is young and relatively affluent, we have always known that there are differences between groups and communities in the prevalence of risk factors for ill-health and public health outcomes.

I developed the vision for my first report half a year ago and I wanted to refresh our understanding of the main areas of health inequality in Wandsworth. I also wanted to recognise the value of place-based approaches with communities and groups that we have worked with and to celebrate the achievements of a fantastic Public Health team that is truly embedded across the council. Finally we had the idea to link this to a calendar of events so that each month, we could explore a single public health issue, call on the residents of Wandsworth to recognise the event days and take up our top tips to improve their health and wellbeing.

Despite the progress made in recent years the emergence of Covid-19 has, once again, nationally highlighted the existence of health inequalities and the need for continued perseverance to reduce them.

Human activity has a significant impact on air pollution and climate change. The Covid-19 pandemic lockdown measures lead to plummeting of emissions from road and air traffic, reduced energy demand and a drop-in output from fossil fuel power stations. Early analysis also shows that levels were significantly lower than the levels normally seen during the year in most of the UK's largest cities for both nitrogen dioxide and small particle pollution.

Shannon KatiyoDirector of Public Health



As cabinet member for adult care and health I have witnessed at first hand the huge dedication and commitment of the department. The COVID crisis has bought so very many challenges for the service and has highlighted the need for very focused and flexible interventions.

As we shape the services for the future we will be working with our residents to put healthy living at the top of the agenda. We need to open the debate about obesity and our sedentary lifestyle. We must continue to reach out to encourage early interventions on mental health. We will continue to work with civic and faith leaders who can help us target these vital messages in an effective way.

This is a thoughtful report which does not shy away from the issues that we face here in Wandsworth. Each month will highlight our aspiration for one area. Please engage with us and let us have your feed back.

Cllr Melanie Hampton

Cabinet Member for Adult Social Care and Health





As a general practitioner in Wandsworth, I see the impact of health inequalities through my practice as I care for my patients. We are all different and our social, economic, ethnic and cultural background affects every aspect of our life, and in particular our health.

Some of the challenges I see in practice have deep economic and social roots and require action at all levels of society and government to address; however some are more amenable to being addressed at a local level. By working together in Wandsworth across health, public health and care services, and working with voluntary and community partners, we can make a tangible difference to the lives of local people. Whilst the COVID pandemic has been an enormous challenge to the NHS and public services in general, it has also generated huge innovation in how we deliver services and engage with patients and communities. This is what we must now build on and this report is a helpful, practical update on the challenges we face that also sets out some of those immediate steps we should all take together.

Dr Nicola Jones

Vice Chair, South West London CCG

Acknowledgements and Thanks

Tackling health inequalities and effective public health delivery is everyone's business. This DPH report testifies to that and is a whole team effort. Thanks go to everyone in Richmond and Wandsworth Council's Public Health Team who contributed and special thanks to Dr Nike Arowobusoye (Strategic Coordination) who led and coordinated the process. Thanks to section contributors, Salman Klar, Sally Bahri, Kate Jennings, Uche Obasohan, Hollie Stone, Jabed Rahman, Ben Humphrey, Leona Patel, Louise Duffy, Tony May, Chloe Bannerman, Dr Lisa Wilson, Cornelius Bella, Rabia Khattak, Dami Gbadebo, Graeme Markwell, Dr Fatumo Abdillahi

Thanks and acknowledgments also to the Community and Partnership teams, The Prevention & Wellbeing Commissioning team, the Leisure and Culture team and the Insights and Analytics team.

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Introduction

Obtaining and having good health and wellbeing is holistic - it includes physical, social, emotional, cultural, mental and environmental wellbeing, for individuals and for the "place" i.e. the system and community. The best way of ensuring a long life in good health is to have a good start in life, a good education, a warm and loving home and an income sufficient to meet our needs. At times this can be unequal and not all in society can expect or achieve this.

Wandsworth is a vibrant and well-connected borough, with many community assets, attractions and facilities. However, inequalities exist. Across Wandsworth there is life expectancy (LE) gap and our vision is to reduce this gap and continue to ensure our communities are healthy, happy and achieve their aspirations. (Wandsworth Joint Health and Wellbeing Strategy 2015-20).

Wandsworth has an estimated 328,828 residents, the second highest in inner London, and a growing population. The increase in the local population is currently driven by natural change (more births than deaths) and in the next 10 years by large new housing developments e.g. Nine Elms. The population of Wandsworth is much younger than both the London and England average. Nearly half of all people living in Wandsworth are aged between 25 and 44 years old. It has a high proportion of people aged between 30 and 34, creating a young population 'bulge' which is unique nationally.

This report shares the steps we have taken to address health inequalities through population level interventions using borough assets to promote healthy lives and also highlight areas where we need to do more. Effective place-based action requires action based on civic, service and community interventions, along with system leadership and planning.

Our priorities were providing healthy places through urban design, healthy homes and building community assets. We ensured that interventions target those in most need through a sustained focus on mental health prevention, early intervention, control and recovery. This combination of actions from all parts of the system has started to reduce health inequalities at population scale. We need to continue and build on our good collaborative work.

Wandsworth is the "go to borough" for people moving to London from the rest of the UK, according to the Office for National Statistics (2017).



Components of the Population Intervention Triangle



Source: Public Health England, Place-based approaches for reducing health inequalities: Main report Published 29 July 2019

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Our Diverse Community:

Strength and collaboration

Wandsworth is a large inner London borough with a younger, educated, economically active and mobile population. The borough is home to an estimated 328,828 residents, the second highest number in inner London.

What we know

Community engagement is the active participation of local residents and community groups in the decisions that affect lives. In Wandsworth, this brings extensive benefits to the progression of the relationship between the council, local NHS, local residents, community groups, businesses, developers and other voluntary sector agencies. These benefits include opportunity to influence, knowledge of local issues, community understanding, trust, removal of barriers and a sense of ownership.

Wandsworth communities include

- BAME
- People who are deaf or hearing impaired
- Carers and their families
- Older people aged 85+
- People living with a learning disability
- People who are visually impaired or living with a neurological condition
- Travellers
- Faith communities



Working with communities is a key public health approach Dami Gbadebo, Policy Officer





What is happening in Wandsworth

In Wandsworth, almost 1 in 3 people are from a black minority or Asian ethnic (BAME) group. Around half the children born are to mothers who were themselves born outside the UK. The majority of these are from the EU (17%), Middle East and Asia (11%), and the rest of the world (10%) which includes the Americas, the Caribbean, Antarctica and Oceania. Non-UK born residents make up 31% of the population. The BAME population is higher in the south and north east of the borough.

Wandsworth performs well compared to other London boroughs for most indicators such as pay inequality, low pay, unemployment and housing delivery. The poverty rate of 21.5% is below the London average, which is 27%.

Residents working full-time earned £34,168 in 2019. This was higher than the England average of £30,667, but lower than the London and inner London earnings of £38,992 and £42,667 respectively. 0.9% of borough residents were claiming income support, fewer than the London and national average. 3,844 households claimed universal credit with the majority being single adult households with no dependent children. Of those individuals claiming universal credit, 0.5% were in employment and 1.1% were not in employment.

Wandsworth ranked the 10th lowest borough in London for those claiming child benefit. However, in 2019 foodbanks providing emergency food supplies increased by 78% from the previous 5 years, with one-third of food banks being for children of primary school age. Wandsworth ranked the 6th lowest borough in London for fuel poverty with 1 in 10 households experiencing poverty.

Wandsworth borough has an active and well-developed voluntary sector with over 900 organisations offering a diverse range of services. The sector is supported by the council's Voluntary Sector Partnership team, part of the Community and Partnership group, which works across both Wandsworth and Richmond.

There are 88 places of worship in Wandsworth. Beyond their religious role, many of these places act as gathering places for community events. This may be an underestimate as other places of informal gathering may not be listed.

Our Diverse Community:

Strength and collaboration

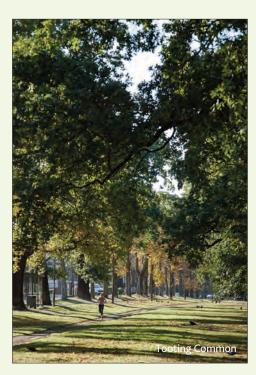
What is happening in Wandsworth

Children

Over 45% of children and young people in Wandsworth are from a BAME group. There is a diverse linguistic ability amongst the BAME young people of Wandsworth compared to the rest of its population. It is estimated that 45% of Wandsworth primary school pupils and 44% of secondary school pupils do not have English as their first language.

Adults and older people

The BAME population is slightly over-represented among service users, in comparison with the borough profile for the given age range and service users include those living in the most deprived areas. There is noted to be a lack of specialist day centres in Wandsworth that are culturally responsive to the needs of the BAME population, of which there is a large proportion in the borough.



What are we doing?

As a Public Health Team, our intention is to keep our diverse communities informed and engaged to ensure that concerns and aspirations are reflected in decisions and service delivery. We will look to our community champions for advice and innovation to find solutions whilst incorporating local contributions.





CASE STORY

The Roehampton Community Network was mobilised by the Roehampton Community Capacity Project funded by Public Health and led by Citizens Advice Wandsworth. The project has made a significant difference in galvanising local groups and organisations within an area that suffered from a lack of coordination and has been highlighted by the local MP, local councillors and others.

As part of the Roehampton Community Response Network, three organisations (Rackets Cubed, Regenerate and Heathmere Primary School) are leading to the establishment of the Roehampton Community Box (delivering food boxes to families in hardship).

The Roehampton Community Box

The Roehampton Community Box deliver community boxes to families in the local area who require additional support and assistance. These boxes provide essential food items, activities and treats. As a result of the generous food donations, volunteers and a brilliant sense of community spirit, they have been able to deliver over one hundred and fifty boxes weekly. Public Health helped them to apply to the Council's Covid-19 Response Fund, they received around £2500 for their operation in April and they have now expanded (from 50) to serving more than 200 families.

The Roehampton Community Knock

The Roehampton Community Knock is a community support initiative that was birthed by the working together of local schools, charities, organisations, community groups and the council in the Roehampton area of Wandsworth. This initiative supports the local population who are unable to access information on how to access food, advice and support in times of crisis.



- Global Community
 Engagement Day: January 28
- World Refugee Day: June 20
- World Senior Citizens Day: 21 August
- Black History Month: October
- Inter-Faith Week: November 8 to 15
- Silver Sunday: 4 October

Health Inequalities:

Wandsworth's vision and strategy

What do we mean by health inequalities, what are their causes and how do we measure them?

Health inequalities are:

The Kings Fund describes health inequalities as avoidable, unfair systematic differences in health between different groups of people.

These unfair differences:

- Are not random, or by chance, but largely socially determined
- Are not inevitable.

They can be considered across a range of dimensions, including:

- Deprivation
- Gender
- Ethnic Group
- Sexual Orientation
- Employment Status
- Disability
- Access to green spaces

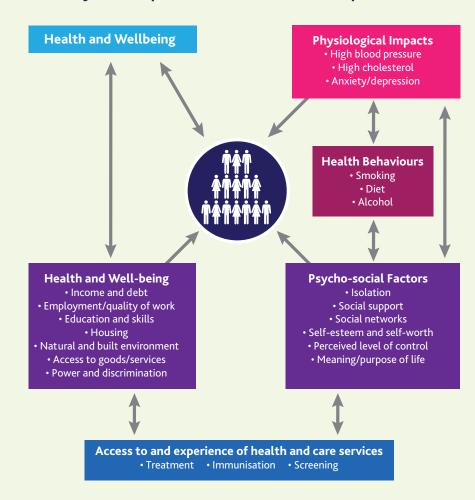
The system map shows:

- · Physiological health status, for example, life expectancy and prevalence of health conditions
- Access to care, for example, availability of treatments
- · Psychosocial factors, quality and experience of care, for example, levels of patient satisfaction
- · Health behaviours, for example, smoking
- · Wider determinants of health, for example quality of housing

People experience different combinations of these factors, which has implications for the health inequalities that they are likely to experience.



System Map of the Causes of Health Inequalities



Health Inequalities:

Wandsworth's vision and strategy

Measures of health inequalities used in the report:

They can be considered across a range of dimensions, including:

- Inequalities in life expectancy
- Inequalities in healthy life expectancy
- Inequalities in avoidable mortality
- Inequalities in long-term health conditions
- Inequalities in the prevalence of mental ill-health
- Inequalities in access to and experience of health services

Avoidable, Amendable and Preventable Mortality

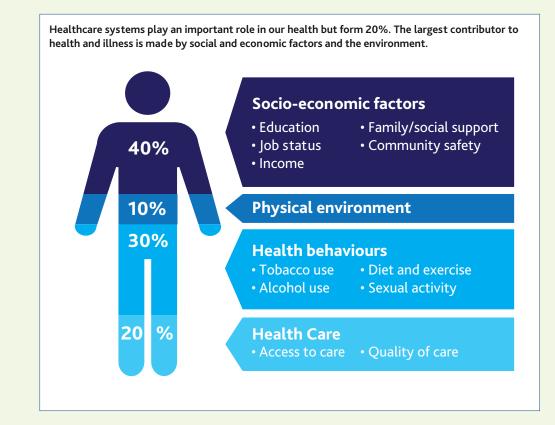
Avoidable mortality describes deaths from causes that are considered avoidable in the presence of timely and effective healthcare or public health interventions. Key causes for avoidable mortality are cancer, cardiovascular diseases and injuries. Between 2015-2017 there were a total of 1,147 deaths from these causes in Wandsworth. This is at a rate of 202.7 per 100,000 population, which is slightly higher than the London rate (200.4), but lower than the England rate (217.3). The rate fell from 207.6 in 2014-16.

Amendable mortality is defined as premature deaths (deaths under age 75) that could potentially be avoided, given effective and timely healthcare. As with avoidable and preventable mortality, the rates are lower for females (100.9) compared to males (136.5).

Preventable mortality describes causes of death which are considered preventable. These are causes where all or most deaths could potentially be prevented by public health interventions in the broadest sense. The Wandsworth rate (167.9 per 100,000) is lower compared to England (181.6).

Taking a calendar format, this report highlights areas of health inequalities and actions taken to address them. Each month features a behaviour-preventable health risk factor, health care condition, long term condition or physical environment or socio-economic factor - a wider determinant of health.





Physical Activity:

Get active and move to a healthier you

Physical activity improves health and wellbeing. Yet physical activity levels are declining in England. Wandsworth is countering this trend. According to the latest Sports England annual survey (2019), 79% of surveyed Wandsworth residents say they are physically active. This is up by 9.3% since 2015. Wandsworth's position is also higher than both the London and England average of 64.5% and 63.3% respectively. This is good news.

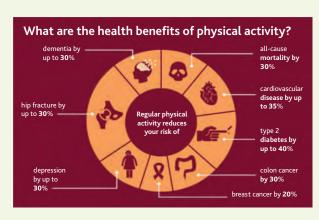
However, Wandsworth has 13.6% of its adult residents classed as inactive. Wandsworth needs to build on its current successes. We need to support more people to shift from being inactive and sedentary to regularly and meaningfully taking part and volunteering in sport and physical activity across every background, age and gender. This will enable more residents, especially those experiencing health inequalities, to improve both their health and wellbeing and connect better with their community, so they can live well and age well.

The lack of regular physical activity matters. Physical inactivity and sedentary lifestyles and behaviours are responsible for deteriorating health, wellbeing and independence. For example, they increase the likelihood of developing mental health issues, diseases, multiple co-morbidities and disabilities. Inactivity or being sedentary is one of the top leading risk factors of death.

Conversely, regular physical activity substantially reduces the risks and some effects of chronic disease and disabilities. It is a key determinant to healthy ageing. It improves mental health and functioning. It provides opportunities for social interaction.

Emerging evidence suggests that increasing physical activity can improve social functioning and reduce loneliness and social isolation. Increased regular physical activity in older people helps them keep more mobile - reducing impairment, increasing independence and improving quality of life.

Maintaining activity throughout the day is also important, particularly amongst older people who may engage less in moderate or vigorous exercise.







Health inequalities of physical activity/inactivity

People with disabilities or long-term conditions are twice as likely not to be active enough for good health. Research also shows that high levels of inactivity and sedentary lifestyles are closely associated with people's poor socio-economic position - specifically income, education and local area deprivation. Other factors that influence people's levels of physical activity are isolation and loneliness or a person's gender and ethnic group. It is known that Asian (excluding Chinese) and black adults are the least likely to be active, whereas, mixed and white other adults tend to have the highest activity levels.

What's happening in Wandsworth

In Wandsworth more men (4.9%) report being physically active compared to women. Conversely men make up a higher proportion of those who are inactive, (circa 14.1%) compared to women (circa13.4%) and that life expectancy for men is 6.3 years lower than women. In addition, Wandsworth has 13.6% of its population inactive (circa 36,500 residents aged 20 years and above) with most affected groups or people being those experiencing health inequalities.

Wandsworth has also found that men identified with a BMI of 30 or more in the main do not prefer to engage in weight loss programmes such as Slimmer's World or Weight Watchers of which females take up over three quarters of the offered places.

This shows that the level of physical activity or inactivity is not proportionally spread across Wandsworth in equal measure. Those experiencing health inequalities tend to be less physically active and more inactive compared to residents in more affluent parts of the borough.



Tony's
Top tips

Tony is Public Health Lead for Prevention

- Build up your levels of physical activity gradually
- Work all the major muscles on at least 2 days a week
- Try walking briskly for 10-minutes or more twice a day
- Go out for a walk in the local park with friends
- Take your children or grandchildren for a kick about in the park.
- Try NHS Choices' Couch to 5k plan
- · Wheel yourself more in your wheelchair

Check out www.wandsworth.gov.uk/health-and-social-care/public-health/physical-activity

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Physical Activity:

Get active and move to a healthier you

In November 2018/19, Wandsworth achieved a significant increase in residents being categorised as physically active compared to the previous year and since 2015. Currently, circa 79% of Wandsworth's adult population achieve 150 minutes or more of physical activity per week (up from 69.3% in 2015), exceeding London's 64.4% and England's 63.2% averages. The number of people self-reporting as being inactive fell from 18.7% in 2015 to 13.6% in November 2018/19. Sport England also report that in 2016/17 Wandsworth had 82% participation in physical activity and sport at least twice in the last 28 days. Wandsworth has a greater percentage of people who are limited by illness or disability participating in physical activity than London.

Healthy life expectancy in Wandsworth for both men and women is increasing whilst time spent in poor health continues to fall. These are all very encouraging figures and is counter to the national trend that expects now and in the future for the numbers who are inactive to increase.

What we are doing in Wandsworth

We are focusing on the health inequalities related to physical activity in order to reduce the effects of the co-morbidities associated with a sedentary lifestyle and lack of physical activity. The council's Public Health Team and Enable Leisure and Culture support people to get physically active and eat more healthily to lose weight and improve their health and wellbeing.

During COVID-19 Wandsworth Council promoted online resources to help people remain physically active from home, especially older people or those with learning difficulties, during the Lockdown period and beyond. These included moving about in the home, walking on the spot, dancing, cardio workout, etc.



CASE STORY

"Couldn't play football, couldn't lose weight, what was I doing joining a football weight loss program?

However, it was great fun and I enjoyed the fantastic team spirit with people in the same situation as me. At the end of the program I scored 2 goals, one in the back of the net and 13kg weight loss."

Kick the Fat participant, Malcolm. Weight loss 13.8kg

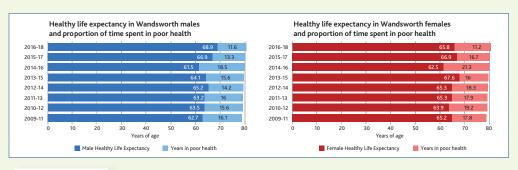
When Malcom started Kick the Fat his weight was 109.6Kg. At the end of the programme his weight went down to 95.8kg.

The aim of the Kick the Fat programme is to support men over a 10-week period, who had a BMI of 27+, to lose weight and improve their nutrition by making heathier lifestyle choices. This is based on Man versus Fat Football (www.manvfatfootball.org). Kick the Fat runs at Furzedown Recreation Centre and we are looking to expand it to another area in Wandsworth.



Examples of physical activities

- Community initiatives such as 'Kick the Fat' and 'Guys Get Active'. The latter is specifically designed to
 target men only as they are not engaging in Weight Watchers or Slimmer's World options. For more
 information go to https://enablelc.org/guysgetactive
- For older people, Wandsworth offers activities such as those organised by our Age Well Centres, especially in Battersea and Roehampton.
- The council's Active Wandsworth Strategy (2017-22) seeks to develop sport and physical activity in the borough with support from partners and contractors, and its lead charity, Enable Leisure and Culture.
 The Strategy's aim is to see Wandsworth become the most active London borough by 2022.
- Our work includes making better use of Wandsworth's green and outdoor spaces, recognising how they
 provide important physical, psychological and social health benefits for individuals and the community.
 Wandsworth has already put in place exercise equipment and outdoor gyms in some of our parks.
- Wandsworth is also very keen to support active travel (e.g. walking, jogging, cycling) across the borough.
 This seeks to make the best use of the River Thames and our highways, parks, playing fields and other facilities for sports and physical activity.





- Clean Air Day: 20 June
- Men's Health Week: 10 to 16 June
- Carers' Week: 8 to 14 June
- Car Free Day: 2 September

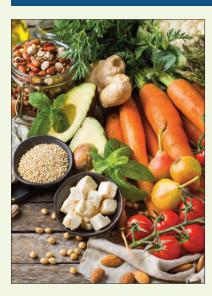
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Healthy Eating:

Eat your greens

Consuming a healthy diet throughout the life course is important and improves health, as well as preventing a range of non-communicable diseases. For example, unhealthy diets increase the risk of some cancers and cardiovascular disease (CVD), both of which are major causes of premature death. The increased production of processed food, rapid urbanisation and changing lifestyles has led to a shift in dietary patterns. People are now consuming more foods high in energy, fats, free sugars and salt/sodium, and many do not eat enough fruit, vegetables and dietary fibre, such as whole grains. Eating a diet poor in nutrients is a widespread public health issue and is exacerbated by poor health literacy and deprivation. This contributes to the current obesity epidemic which is increasing year on year across the population, over the whole life cycle.

What we know



It is recommended nationally by government that children and adults consume at least five portions of fruit and vegetables a day, 30g of dietary fibre (less for those under 5 years), and that consumption of free sugars is under 5% of total dietary energy per day.

These recommendations were set in response to the increasing rate of obesity in all ages and escalating incidence of dental decay in young children (9 out of 10 hospital tooth extractions among children aged 0 to 5 years were due to preventable tooth decay). Dietary surveys such as the National Diet and Nutrition Survey (NDNS) and Health Survey for England indicate the general quality of food intake in some of the population. Dietary risks (such as low fruit and vegetable intake) and obesity contribute to approximately one third of all deaths from cancer and CVD.

Eating foods high in fibre can reduce the risk of some cancers and conversely over-consumption of processed and red meat, and alcohol can increase the risk of developing some cancers.



- Cycle to Work Day: 8 August
- Know Your Numbers week (blood pressure): 9 to 15 September
- Healthy Eating Week: 8 to 14 June
 National Cholesterol Month: 1 to 31 October
- Men's Health Week: 10 to 16 June
 World Diabetes Day: 14 November



Breastfeeding

Breastfeeding ensures babies have the best possible start and is an important Public Health priority - supporting families to breastfeed whilst increasing the number of babies breastfed. Research demonstrates exclusive breastfeeding should be recommended for around the first 6 months of life, with continued breastfeeding alongside solid foods for at least the first year of life. Breastfeeding has significant health benefits for mother and baby which includes protection against illness and infection for the baby; prevention of diarrhoea and respiratory infections for the baby; reduced risk of Sudden Infant Death Syndrome for the baby; reduced risk of breast cancer, postnatal depression and ovarian cancer for the mother.

Health inequality issue

Deprivation is an underlying and recurring theme in relation to nutrition and healthy eating. People living on low incomes or those who are unemployed are more likely to have poorer diets and experience food poverty. Amongst adults, this may be characterised by parents on low incomes going without food so that their children can eat; working people whose low wages leave them struggling to buy healthy food; or older people unable to prepare meals without support.



Chloe & Louise Top tips

Chloe and Louise are leading on the council's Healthy Eating Agenda

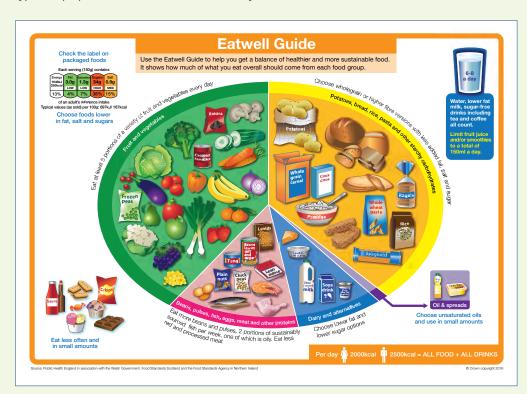
- Eat at least five portions of fruit and vegetables a day
- · Make vegetables the largest portion on the plate every time
- Aim to 'eat a rainbow' of fruit and vegetables across the week
- Replace white, refined starch foods with wholegrain varieties

Healthy Eating:

Eat your greens

What is a healthy balanced diet?

The government's healthy eating advice, illustrated by the Eatwell Guide, is a visual representation of the types and proportions of foods needed for a healthy, balanced diet.





To ensure that ones diet is nutrient rich, meals and snacks should include the following foods each day:

| POTATOES, BREAD, RICE, PASTA AND OTHER STARCHY CARBOHYDRATES | Provides energy (calories), carbohydrates, dietary fibre and B vitamins. Fortified breakfast cereals can also be a good source of iron |
|--|--|
| FRUIT AND VEGETABLES | Good source of dietary fibre, vitamins (including vitamin A and C), and minerals such as zinc and iron |
| DAIRY AND ALTERNATIVES | Good source of energy (calories) protein, calcium and vitamin A |
| BEANS, PULSES, FISH, EGGS, MEAT AND OTHER PROTEINS | Provides protein, zinc and iron. Oily fish is an important source of omega 3 fatty acids, vitamin A and vitamin D (in small amounts) |

What we are doing in Wandsworth

- We have been working with partners across the council to incorporate healthy eating and nutritional guidelines into newly commissioned council contracts, for example for older people's day centres and leisure centres.
- We have been exploring the feasibility of implementing a policy to restrict the advertising of High Fat Salt Sugar (HFSS) foods across the borough.
- We have supported work around promoting healthy eating for those who are at greater risk of developing diet related disease, including adults with learning disabilities and BAME groups.

Air Pollution and Climate Change:

Take a deep breath

Air pollution can have harmful effects on human health and is the largest environmental risk to the public's health according to Public Health England (2019). The quality of London's air has been shown to contribute to exacerbations of poor health and underlying chronic disease. This was highlighted in 'Our Vision for London' (2019) a report produced by the GLA, PHE, London Councils and NHS England; it advances a need for collective action and sets a key aim to reach legal concentration limits of Nitrogen Dioxide (NO2) and work towards World Health Organisation (WHO) limits for Particulate Matter (PM2.5) by the year 2030.

Air pollution and poor air quality is closely linked to climate change. Key pollutants such as black carbon (which is a type of PM) and ozone (O3) are also classed as greenhouse gases (GHGs) which contribute to climate change. Sources of air pollution such as vehicles burning fossil fuels also produce CO2, the most common GHG.

In 2001, an Air Quality Management Area (AQMA) was declared for the whole borough of Wandsworth for exceeding national air quality objectives for NO2 and PM and an Air Quality Action Plan was introduced to help tackle the issue at a local level. The current Air Quality Action plan covers the period 2016-2021.

The development of a new plan is underway. Efforts to improve local air quality and reduce pollution are closely aligned with the objectives of the Wandsworth Environment and Sustainability Strategy (WESS), which has air quality as one of its seven themes. Several actions within the WESS specifically seek to improve air quality as a co-benefit of reducing our carbon emissions and moving to healthier modes of travel. Examples of these actions include the implementation of school streets, opposing the expansion of Heathrow airport, targeting vehicle idling, use of e-Cargo bikes and the expansion of electric vehicle charge points.

What we know

Pollutants with the strongest evidence for public health concern, include PM, NO2, Ozone (O3) and Sulphur Dioxide (SO2). A significant proportion of London's emissions comes from transport, construction and industrial processes. Heating in homes and business activity also produce substantial pollution according to the London Atmospheric Emission Inventory (LAEI).

It is estimated by the LAEI (2019) that roughly 2 million Londoners (including more than 400,000 children) live in areas that exceed legal limits for air pollution. A report by the Committee on the Medical Effects of Air Pollutants (2018) points out that between 28,000 and 36,000 premature deaths in the UK every year could be linked to long-term exposure to air pollution (NO2 and PM).

The health risks associated with Particulate Matter of less than 10 and 2.5 microns in diameter are especially well documented. PM is capable of penetrating deep into lung passageways and entering the bloodstream causing cardiovascular, cerebrovascular and respiratory impacts. The main effect of breathing in raised levels of NO2 is that it can lead to increased respiratory problems (inflaming the lining of the lungs), contributing to reduced immunity to lung infections as well as frequent and more intense asthma attacks.



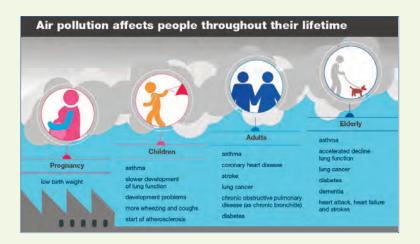
- Clean Air Day: Thursday 8 October
- World Car Free Day: Tuesday 22 September



Health inequality issue

The impact from outdoor air pollution can affect people throughout their lives, having short-term and long-term effects, contributing to cardiovascular disease, lung cancer, dementia and respiratory diseases. Poor air quality also increases the chances of hospital admissions for those with underlying health problems.

- Poor air quality affects everyone and it has a disproportionate impact on the young and old, the sick and the poor. The Committee on the Medical Effects of Air Pollutants (COMEAP, 2018) has highlighted that exposure to air pollution contributes to increased risk of cardiovascular disease (CVD), respiratory disease and cancers.
- It is important to highlight the health inequalities associated with air pollution and location of where
 people reside and/or work. In polluted areas they are likely to be exposed to higher levels of NO2 and PM
 on a day to day basis. This may include school children going to and from school as well as certain jobs
 where workers carry out activities near roads for long periods of time.
- Low income communities are also more vulnerable, particularly as they are more likely to have existing
 medical conditions. People in areas of deprivation are more likely to be exposed to higher concentrations
 of air pollution. This highlights a significant health inequality for the borough of Wandsworth itself
 where there are significant differences in deprivation levels across the borough.



Air Pollution and Climate Change: Take a deep breath

What is the level of impact?

Health England has estimated that the fraction of annual all-cause adult mortality attributable to anthropogenic (human-made) particulate matter (PM2.5), expressed as the percentage of annual deaths from all causes in those aged 30 plus (Indicator D10, Health Protection, 2018) is 6.7% for Wandsworth which is higher than London (6.6%) and England (5.2%) averages.

Population exposure based on 2016 modelled data (latest available) from the London Atmospheric Emissions Inventory (LAEI, 2020) estimated that 25.5% and 13% of residents in Wandsworth were exposed to NO2 and PM2.5 which were in excess of legal objective limits accordingly. This is the highest for any borough in the South London sub-region.

What we are doing in Wandsworth?

The council is committed to making sure that people throughout the borough have clean air to breathe. Air quality is continuously assessed via a system of localised monitoring stations. The council also has an Air Quality Action Plan (2016-21) in place which focuses on a number of actions (along with local partners) being undertaken to help reduce the levels of NO2, PM2.5, PM10 as well as other air pollutants.

Wandsworth declared a Climate Emergency in July 2019 and has produced the Wandsworth Environment and Sustainability Strategy and Action Plan which sets out what the council and the borough can do to address climate change. Addressing air pollution is a key priority within our climate change approach.

Action is focused on the key sources of air pollution within the borough of which the biggest sources are road transport, construction, industrial as well as domestic heating and power related activities.

Jabed's Top tips



Jabed is Wandsworth's Public Health Lead for Air Quality

- Be aware of when outdoor air pollution is likely to be high and reduce your exposure.
 Sign up to the free AirText service and receive regular updates and health advice at: www.airtext.info/signup
- If you want help to identify low pollution walking and cycling routes in Wandsworth and other parts of London, then go to the Clean Air Route Finder website at: www.cleanairroutes.london



Key objectives to address localised air pollution include:

- Promoting alternative modes of transport to the car, including cycling and walking
- Continued roll-out of electric vehicle charging in the borough including plug-in vehicle charging points, this includes 700 lamp post sites
- Encouragement and roll-out of eco-friendly electric car clubs
- Shifting of the council vehicle fleet to electric
- Enforcement action around anti-idling including the introduction of fixed penalty notices
- Encouraging freight consolidation and use of cargo bikes for deliveries such as the e-cargo bike trial launched in Tooting
- Stringent air quality assessments of new developments, including demolition and construction and construction of zero carbon developments as the norm
- Providing information to residents about replacing of old boilers with those that are less polluting including low-carbon heating systems
- Promotion of the free AirText service providing air quality alerts and forecast by text messages especially
 for people who maybe more vulnerable to the health impacts of air pollution.
- Promotion of low air pollution walking and cycling routes via the Clean Air Route Finder website.



CASE STORY

Nine Elms is one of the largest construction sites in the UK. The site saw significant air quality problems due to the number of developments underway at the same time, this was mainly from PM10 with legal limits being breached more than 43 times in 2016 (the legal limit is 13 per year).

Public Health established and coordinated an Air Quality Taskforce Board to implement best practice. Actions included working with developers to control dust from demolition activities, the introduction of hybrid and electrical non-road mobile machinery, consolidated material delivery and waste removal by lorries, as well as increased frequency of street cleaning.

Public Health also secured funding for two air quality officers through the planning process called Community Infrastructure Levy (funded via developer contributions). This enabled additional actions to be implemented to reduce the impact of air pollution linked to activities on-site, this included increased monitoring, increased site inspections, coordinated dust control measures between sites to lessen cumulative impacts. Through these concerted efforts, levels of onsite exceedances of PM significantly reduced to only 8 occurrences during 2018.

Social Isolation and Loneliness: All by myself

Social Isolation and loneliness can have a significant effect on health and wellbeing, leading to a range of preventable health conditions. Whilst the two issues are often linked they are unique concepts and, although often confused, are defined separately.

Social isolation is the more widely used quantitative measure of the number of people someone has contact with. Loneliness is subjective, based on someone's desired contact and their perception of their relationships, and therefore harder to measure.

The key distinction is that people can appear to be isolated but not feel lonely. Conversely, it is possible to feel lonely when surrounded by people. Social isolation can often be overcome by providing greater opportunities for contact with others. However, without intervention or support social isolation can lead to loneliness and vice versa.

Both social isolation and loneliness can occur in all ages and across the life course, but older and disabled people are disproportionately affected. Changes in life circumstances, bereavement and physical or mental ill health can all have an impact on a person's experience.

What we know

- Lonely people are more likely to suffer from dementia, heart disease and depression.
- Loneliness is likely to increase risk of death by 29%.
- Socially isolated and lonely older people are more likely to have a poor appetite and be at risk of malnutrition.
- Frailty is increasingly recognised as an important issue related to aging. There is no universally
 accepted definition but the idea of frailty being related to the "increased vulnerability to stress" is
 paramount, as well as its association with an "increased risk of adverse health outcomes including
 disability, hospitalisation, institutionalisation and death".
- Mobility is seen as a separate entity related to old age and is defined as "the ability to move oneself within environments, either independently or using assistive devices".
- Increasing dependence on social care services is a result of an ever-increasing aging population and
 frailty is associated with this. The level of need and wellbeing of the older population of the
 borough can be deduced from the use of these services. These include the use of day centres and
 occupation of residential placements that may also help with social isolation and loneliness.



What's happening in Wandsworth

Social exclusion and isolation are issues for many people living in Wandsworth. This may be linked to the high churn rate of the population or poor access to public transport and car availability amongst the older population.

We know that:

- 39% of people aged 65 and over live alone in Wandsworth (>10,000 residents). This figure is predicted to increase to 11,300 by 2020.
- The Survey of Londoners 2018/19 revealed that 30% of the participants from Merton and Wandsworth stated that they often felt lonely, and 22% of participants felt socially isolated, stating that they did not have someone they felt they can rely on in an emergency.

The Age UK heatmap of loneliness (2016) gives further evidence of the risk of loneliness for Wandsworth residents. The map used four factors - marital status, self-reported health status, age and households, to predict risk of loneliness at Lower Super Output Area (LSOA) level. These have been found to predict around 20% of the loneliness observed amongst people aged 65 and over.

Wandsworth was found to have 31 LSOAs that rank amongst the 'highest risk' LSOAs for loneliness for older in the UK. In addition, 45% of LSOAs in Wandsworth (81/179) fell in the first five deciles for the highest propensity for social exclusion of older people.

In total 53% of LSOAs in Wandsworth (95/179) were ranked in the worst scoring decile for at least one indicator. There is predicted to be a population increase in the number of older people living in Wandsworth of 13% by 2025, and 46% by 2035.

The over 85 age group is predicted to increase at a faster rate with an increase of 18% expected by 2025 and 64% by 2035. The proportion of the older population with long term illnesses that are likely to limit their daily functioning is estimated to increase by 47% by 2035, a higher rate than the general population. As well as this, the proportion of the older population living with dementia is predicted to increase at a higher rate than the general population, of 51% by 2035.

Social Isolation and Loneliness: All by myself

What are we doing?

Wandsworth Council are hoping to move away from an intensive support model in old age such as residential and nursing home care and focus more on encouraging greater independence in old age. There is a commitment to support people living at home. However, there has been an increased demand for residential and nursing care in 2016/17 compared to the figures of 2015/16. It is thought that this demand has increased further due to changes in the population demographics and increasing social support available within the NHS. The council has said it will ensure the provision of these services meets the ever-increasing demands of the population

There are also several projects working across Wandsworth to reduce both loneliness and social isolation among residents. Some involve providing a place for people to go to reduce isolation, others are more focused on providing friendship and understanding to tackle loneliness.

The Furzedown Project - an activity centre for older people located in Furzedown, which aims to prevent social isolation in the elderly population and improve the health, wellbeing and independence of its members. Annual subscription fees are £20 and class fees are £2 a session.

Home-Start Wandsworth - This project has several successful initiatives around social isolation and loneliness including:

- a home visiting service 81% of users reported feeling less isolated
- a "bump to baby" scheme 70% of users reported feeling less isolated
- hubs in the community 68% of users reported feeling less isolated and 55% reported they had made new friends as a result of attending the hubs.

Age UK Wandsworth Be-a-Friend Service - a free service which matches socially isolated older people with volunteers to provide regular companionship. They also provide an 'Out and About' service.

The Sunflower Café - for residents of Wandsworth, Lambeth and Dulwich where regular activities are hosted such as bingo, cards, singing and knitting.

Top tips for feeling less lonely or isolated

- If you feel socially isolated ask your GP, friends or family for places to visit or look online
- · Check in with the older people you know
- Talk to someone, say hello
- If you work with older people, take part in training to identify those at risk of loneliness or isolation
- Spend time outside



Other projects which help to address loneliness or social isolation include: HomeStart Wandsworth, community libraries, Brighter Fair and social prescribing projects. Public Health are working with Council Front Door and CCG on the Wandsworth Social Prescribing scheme which will introduce Social Prescribing Link workers in primary care and adult social care who will support people to address loneliness and social isolation.

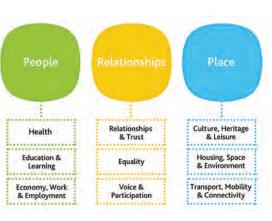
Reducing social isolation and loneliness is a priority for Wandsworth. Professor Rusi Jaspal, leading psychology expert and Pro Vice-Chancellor for Research at De Montfort University Leicester (DMU), has been appointed by Wandsworth Council to help tackle social isolation and loneliness.

Co-op Community Wellbeing Index

The Co-op's Community Wellbeing Index gives an insight into what's important to people in a local community. From the quality of education, housing affordability, and public transport - to the amount of green space and the number of community centres.

Nine key areas were measured, these were grouped into: people, relationships, place. The index scores are available for "communities" defined by Co-op and partners - these do not exactly align to borough boundaries.

The average score across communities that are largely within Wandsworth is 63 out of 100 higher than the national average of 52. Most relevant to social isolation, the average score for Relationships & Trust in Wandsworth was 63. The average Voice & Participation score across communities in Wandsworth was 59.





- Falls Prevention Awareness Week:
 22-28 September
- World Menopause Day: 18 October
- Silver Sunday: 4 October

Smoking:

Behind the smokescreen

Smoking remains a major public health concern for Wandsworth borough. Tobacco use leads to preventable disease and is closely linked to inequalities in health outcomes between different groups. Smoking is linked to conditions such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease as well as a number of other cancers.

In short, smokers die younger. Whilst smoking cigarettes remains the most common, there is evidence that other forms of tobacco use are increasing (eg. Shisha).

National data suggests that for each death linked to smoking, there are 20 smokers with a smoking-related disease. However, this figure does not take into account the impact of second hand smoke.





Cornelius' Top tips

Cornelius is Wandsworth's Public Health Lead for Smoking Cessation

- Set a quit date and stick to it
- You are 4 times more likely to quit with support
- Stop smoking to save money and add 10 years to your life



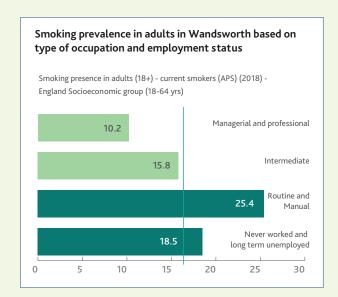
While we are below both the London and National average, we are aiming to reduce our figures further. Wandsworth continues to be successful in reducing the number of smokers. Our stop smoking service supported 2,144 quitters in 2018 and the proportion of adults who smoke continues to decline. However, we still have work to do.

The stop smoking service is committed to continuing to meet its targets and deliver a cost effective service, supporting residents to set a quit date and stick to it.

The service have also successfully lowered rates of pregnant smokers in the last year (now only 2.5% of mothers smoke). However, in adults, emergency hospital related admissions for COPD and smoking related deaths remain high, reflecting the need to continue to prioritise smoking cessation in Wandsworth.



We know that smoking prevalence is higher in some residents and that disadvantaged groups are at greater risk of complications and poorer outcomes. For example, those in lower earning occupations are twice as likely to smoke compared to the highest earners in Wandsworth. As such we continue to work with vulnerable and disadvantaged groups, including women under 20, pregnant women and low income families.







- No Smoking Day: 11 March
- October Stoptober: 1 October

World Oral Health Day: 20 March World No Tobacco Day: 31 May

Smoking:

Behind the smokescreen

What are we doing

The Wandsworth Tobacco Control Alliance was established to reduce the negative impact of smoking on borough residents. We know that effective measures can reduce the number of people smoking. We are committed to reducing the impact of smoking on the wider population of the borough, including preventing babies and young children from exposure to second hand smoke.

To support under 18s to stop smoking the Public Health Team have been working closely with Catch 22 (a local youth group) to provide advice for young people across schools and colleges. They also provide workshops and outreach services to educate young people on the dangers of smoking as well as supporting them to quit. This project works in partnership with Regulatory Services to restrict under age and illicit tobacco sales. To support adult smokers in quitting, Wandsworth's Stop Smoking Service offers free advice and support. The council also offer drop-in locations at Queen Mary's hospital and St George's hospital in addition to services offered by local GP practices and pharmacies.

Stop smoking support is also available for people with serious mental health conditions, through the smoke-free wards and grounds project. This project is in partnership with the Mental Health Trust and is aimed at secondary care inpatient services.

The council aims to ban cigarette vending machines and tobacco displays as well as encouraging smokers to change their behaviour by taking control of their health.

CASE STORY

Battersea is a vibrant, diverse area of the borough, offering inner-city living to its growing population of over 90,000 people. However, there are also pockets of deprivation in the area. Over half of the differences found in health status among residents can be linked to smoking. The resulting ill health from smoking is the single biggest factor in a seven year difference in life expectancy between residents.

Yvonne, who lives in Battersea decided to stop after smoking 20 cigarettes a day for 50 years. She shared her experience of using the Wandsworth Stop Smoking Service at St George's:

"The care I got there was unbelievable and I couldn't have done it without their help. They took the time to talk to me, listened to me and encouraged me - they were brilliant. When I think of the effect smoking had on my health and the money I spent - I might as well have burnt it - I really regret it, but the beautiful ladies at St George's told me not to regret the past, but to look forward.

"Smoking has an impact on all areas of your life, but I didn't even realise it at the time because I was walking around in a cloud of smoke. I feel so much better now and my grandchildren tell me how much fresher my house smells."



Smoking related data for Wandsworth

| | Period | Wandsworth | | | Region | England | England | |
|--|---------|-----------------|--------|-------|--------|---------|------------------|------------------|
| Indicator | | Recent trend | Count | Value | Value | Value | Worst/ Lowest | Best/ Highest |
| Smoking prevalence in adults (18+) - current smokers (APS) | 2016 | - | 31,915 | 12.2% | 13.9% | 14.4% | 26.1% | 5.9% |
| Smoking prevalence in adults (18-64) - socio- economic gap in current smokers (APS) | 2018 | - | - | 1.96 | 2.17 | 2.47 | 5.34 | 0.95 |
| Smoking prevalence age 15 years - regular smokers (SDD survey) | 2018 | - | - | - | - | 5% | - | - |
| Smoking prevalence age 15 years - occasional smokers (SDD survey | 2018 | - | - | - | - | 6% | - | _ |
| Smokers that have successfully quit at 4 weeks | 2018/19 | - | 697 | 2,144 | 1,950 | 1,894 | 55 | 7,540 |
| Smoking status at time of delivery | 2018/19 | 1 | 112 | 2.5% | 4.8%* | 10.6% | 25.7% | 1.6% |
| Smoking attributable mortality | 2016-19 | - | 687 | 234.0 | 218.8 | 250.2 | 478.8 | 134.4 |
| Smoking attributable hospital admissions | 2017/18 | - | 1,519 | 1,417 | 1,370 | 1,530 | 2,990 | 721 |
| Deprivation score (IMD 2015) | 2015 | - | - | 18.3 | - | 21.8 | 42.0 | 5.7 |

Other challenges

Our work aims to reduce tobacco use in all its forms across the borough.

In addition to smoking, tobacco can also be chewed or sniffed. Smoked tobacco products include cigarettes, cigars, bidis, and kreteks. Some people also smoke loose tobacco in a pipe, hookah or shisha (waterpipe). Chewed products include tobacco, snuff, dip, and snus; snuff can also be sniffed. E-cigarettes, also known as vaping, are increasingly common.

Shisha

Shisha (or waterpipe) smoking has been traditional practice in the Middle East and Southern Asia for several hundred years. More recently, the use of shisha has increased across London, including in Wandsworth.

This presents a particular challenge as for many years smoking shisha had been incorrectly assumed to be a safer alternative to cigarettes. However, the pipe smoke contains harmful chemicals leading to it being identified as a public health concern. Recent evidence suggests that a one hour session of shisha is the equivalent to smoking 100 cigarettes.

Alcohol and Substance Misuse:

Live responsibly

The issue

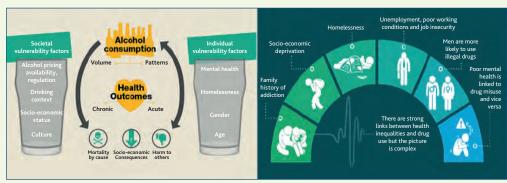
Substance misuse comprises both illicit drug use and harmful alcohol use for a purpose that is not consistent with legal or medical guidelines. The substance in this definition includes synthetic or natural psychoactive substances.

Alcohol misuse amongst 15-49 year olds in the UK is the largest cause of premature death, ill health and disability in this age group and is the reason for reduction of harmful drinking being one of PHE's seven priority areas.

What we know

There is a well-known association between the age of substance use initiation and later life dependency. A number of factors at individual, family, peer, school and neighbourhood level play a contributing role in both the age of drug and alcohol initiation and continuation of use throughout the life course. Some of these factors can span over a lifetime. Furthermore, the antisocial activity and offending behaviour related to substance misuse affect wider society including neighbourhoods and the workplace.

Risk factors for substance misuse





- Alcohol Awareness Week: 11 to 17 November
- Diabetes Week: 8 to 14 June
- Dry January Campaign: January 2021 · World Heart Day: 29 September
- Mental Health Awareness Week: 18 to 24 May



What is happening in Wandsworth

The population in Wandsworth is potentially at a greater risk of substance misuse. Firstly, there is a large transient population of young people who are more likely to use drugs recreationally in social settings such as nightclubs, bars and pubs. Furthermore, the long-standing population in Wandsworth has higher levels of deprivation. Social and economic deprivation has been linked to higher rates of alcohol abuse.

This is a growing problem in Wandsworth which is an area of high health inequality. People who are homeless are also at risk of long-term substance use disorders. These disorders can be a causal factor in homelessness, and the street lifestyle is often substance use based, which further compounds the issue in this group. Wandsworth has 5.9 per 1,000 households who are classed as statutory homeless. This is significantly higher than than the London (4.2) and England (2.4) average.

- There were a total of 380 deaths due to substance use in Wandsworth between 2016-2018. Just under 70% of substance use deaths were alcohol related.
- Alcohol use and availability in Wandsworth is higher than the national values.
- 43.9% of adults (18+) who drink alcohol consume more than the safe limits of 14 units per week, which is the highest rate in London and significantly higher than London and England averages (21.6% and 25.7%).
- Wandsworth also performs more poorly than the rest of the nation in local population having the most alcohol-related conditions. There were 3,880 admission episodes related to alcohol between 2015-2018.
- Admission episodes for alcoholic liver disease, admissions due to mental and behavioural disorders directly related to alcohol and admissions for alcohol related cardiovascular disease in Wandsworth are higher than the London and national picture.
- The estimated number of people aged 16-64 using opiates and/or crack in 2016/17 was 1,500 and 3,700 adults were estimated to be dependent drinkers in 2014/15.
- The proportion of drug use is likely to be reflected by the significant proportion of homeless young people in Wandsworth in comparison to the national value, where illicit drug use is rife and often is a significant contributor to the circumstances.
- Compared to national figures, there are more young people (age 15) who have tried cannabis or other illicit drugs in Wandsworth.

Alcohol and Substance Misuse:

Live responsibly

What are we doing?

Public Health take part in work related to the three pillars of prevention, treatment and enforcement and also chair the Substance Misuse Strategy Group. As the responsible authority, Public Health review all licensing applications to ensure they are regulated and monitored from the perspective of a healthy local population on the licensing objectives.

The adult drug and alcohol services have been recommissioned starting April 2020. This universal service will be delivered through a consortium model across Richmond and Wandsworth. The major ambition for the new service is to migrate from a single provision hub approach to one of multi-disciplinary nodes, resulting in greater service user choice of intervention and treatment environment.

The Drug and Alcohol Related Deaths (DARD) panel review all drug and alcohol related deaths and devise case specific actions to reduce the risk of further drug and alcohol related deaths. They reviewed 33 deaths (01/18 - 09/19)

Wandsworth PH commissions an online audit tool, DrinkChecker. Available on the council's website, the DrinkChecker helps residents measure their alcohol consumption and recognise harmful drinking patterns - signposting to advice, support and treatment if necessary.

Services for residents include:

- Wandsworth Community Drug and Alcohol Service (18+ age) comprised of SLaM, Addaction and St Mungo's, it involves a team made up of psychiatrists, psychologists, nurses, substance misuse workers, criminal justice teams and administrators. It provides both physical and psychological support and onward referral after initial substance misuse is tackled.
- Catch 22- counselling for young people aged 11-18 who are suffering with drug and alcohol addiction, including support for emotional health.



Rabia's Top tips

Rabia is Wandsworth's Public Health Lead for Alcohol & Substance Misuse

- Don't drink more than 2-3 units per day and 14 units per week
- Speak to someone if you are struggling
- Find ways to socialise that do not involve alcohol or drugs



What we will focus on going forward:

Illicit drug use continues to be a significant problem in Wandsworth. Wandsworth performs better than the national values in successful completion of drug treatment in non-prisoners compared to the national average for both opiate and non-opiate users. However, successful engagement of adults in community-based structured treatment following release from prison is significantly worse than the national value, at 9.2% compared to the national value of 34.2%. Public Health will work with Community Safety, commissioners and providers to ensure those released from prisons continue their community-based treatments and are supported better and earlier.

Public Health work closely with commissioning and provider colleagues to improve numbers in treatment, ensuring those who need help get the right support in a timely manner, so that numbers in treatment can increase. A specific focus after Covid-19 would be working closely with communities located in the 20% most deprived areas.

CASE STORY

Daniel Spargo-Mabbs Foundation drug and alcohol education

The DSM Foundation is a drug and alcohol education charity founded in 2014 by Tim and Fiona Spargo-Mabbs in response to the death of their 16 year old son Daniel having taken ecstasy. They have worked with four of the borough's independent schools since 2016, delivering workshops to students and parents,



providing schools with planning and resources to deliver evidence-based drug and alcohol education lessons and bringing a production of their play to students. In 2020 they have been able to work in the state sector, with three performances of their play at Graveney School with year 9 and 10 students.

'I Love You, Mum - I Promise I Won't Die' is a verbatim play by award-winning playwright Mark Wheeller, using the words of Dan's family and friends to tell his story. Performances are followed by interactive drug and alcohol education workshops. Of 189 students at Graveney School, 77% said they had learned more about the risks of drugs, 81% said they had learned more about the possible consequences of drugs, and 80% had learned more about the impact drug use can have on others.

Sexual Health:

Stay safe

Local Authorities are responsible for sexual health services. Sexual health services involves screening and treatment of sexually transmitted infections (excluding HIV treatment), contraception provision, sexual health promotion and prevention services. GP Surgeries and Pharmacies are an integral component of the sexual health system in Wandsworth.

What we know

- It is important to note the cultural differences in sexual health. More specifically, there are varying views on the use of contraception and barrier methods of contraception, making it difficult to target certain groups and protect their sexual and reproductive health.
- As well as this, the stigma associated with STIs can highly impact a young person wanting to seek help and the importance of regular screening in a highly sexually active population.
- It is important to note the health inequalities with regards to the higher prevalence of STIs, particularly HIV, in the MSM population. This population is generally associated with higher risk behaviour, continuing to highlight the health inequality and the need for more sexual health services amongst this specific group.
- The working age population are those that seek access to sexual health services the most, and can experience difficulties accessing services.

Public Health Team Top Tips

- If under 25 years old, take up chlamydia screening programme
- Promote the full range of sexual and reproductive health services (including GPs, pharmacies and on-line) with your service users
- Encourage positive, healthy sexual health conversations



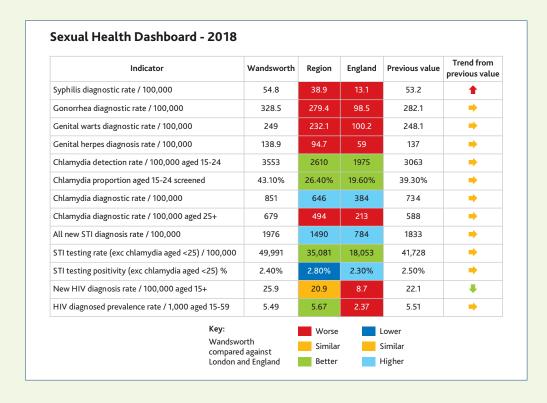
What's happening in Wandsworth

- There is generally a much higher rate of STI diagnosis in Wandsworth compared to England.
- Wandsworth has a relatively young population compared to the rest of the country, with a median age of 33.7 years compared to 35.1 in London, and one of the highest proportions of 20-44 year olds in London, highlighting the need to target STI services and family planning.
- There is a high rate of emergency contraception uptake in the borough. However, 25% of emergency
 contraception is from people that don't live in Wandsworth (those that are working or travelling through
 the area). In pharmacies, during 2018/19, there were 5,681 consultations for emergency contraception.
- In 2016, 41.4% (1345) of new STI diagnosis in Wandsworth residents were among gay, bi and other men
 who have sex with men (MSM), which is an increase from 37.6% (1152 diagnoses) in 2013. ONS
 estimates suggest 22% of the LGB population have been diagnosed with a new STI, which is significantly
 higher than the general population and highlights a health inequality in this group,
- The new STI diagnosis rate (excluding chlamydia aged <25) is 2195 per 100,000 compared to the national value of 851 per 100,000. Wandsworth is performing poorer than the national values, with higher diagnosis rates of chlamydia >25 years old, syphilis, gonorrhoea, genital herpes and genital warts.
- The HIV prevalence rate is also higher than the national population at 5.49 per 1000 compared to the
 national value of 2.37 per 1000. HIV testing coverage in Wandsworth is higher than London and England.
 The new HIV diagnosis rate is declining in Wandsworth but still remains higher than London and
 England.
- Wandsworth chlamydia detection rate is higher than the London and England rates but has a declining trend. Wandsworth performs better than London and England for the percentage of eligible population screened for chlamydia.
- Conception rates for the under 18s have fallen nationally and in Wandsworth (2018), is lower than
 England and London. Teenage conception resulting in a termination rate is higher than London and
 England figures.
- During 2018-19 there were a total 10,534 sexual health interventions delivered in a primary care setting, this includes 3,179 LARC procedures undertaken by GPs.
- Across both settings in primary care, 752 young people were screened for chlamydia, 43 positive cases were identified
- Contraception service activity in primary care is high and increasing with the available resource being utilised in full.

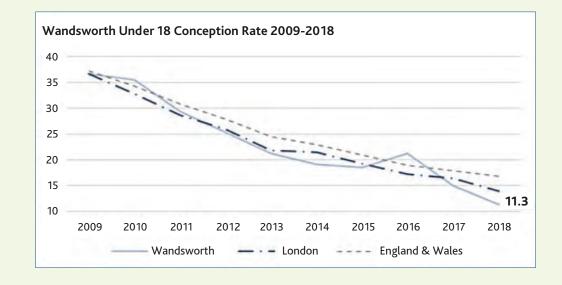
Sexual Health:

Stay safe

Sexual health profiles









- RSE Day: 25 June
- Sexual Health Week:
 16 to 22 September
- World AIDS Day: 1 December

Addressing Health Inequalities:

As we start

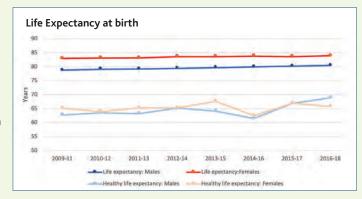
Life expectancy (LE)

Life expectancy for Wandsworth residents has increased between 2001 to 2018. Men and women in Wandsworth are living longer than they were and longer than the rest of England. As is commonly seen, women are living longer than men. In Wandsworth this is 4.5 years longer. Although the number of years men are living in good health is increasing, this is not the case for women.

Life expectancy at birth in 2015-2017 was 80.2 years for males and 83.6 years for females. At 65 years, life expectancy in Wandsworth is 18.8 years for males and 21.3 years for females.

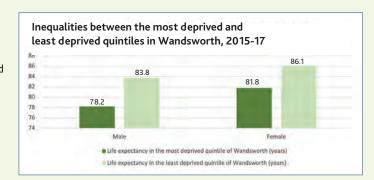
Healthy life expectancy at birth

Healthy life expectancy (the number of years of life without serious illness) is 66.9 years among men and women in Wandsworth. This age has been steadily increasing in men since 2001/03, while for females the healthy life expectancy has fluctuated.



Deprivation

Life expectancy is lower in areas of deprivation. Male residents in the most deprived areas of the borough live on average, 5.6 years less, and females 4.3 years less, than males and females living in the least deprived areas of Wandsworth. (2015-2017).

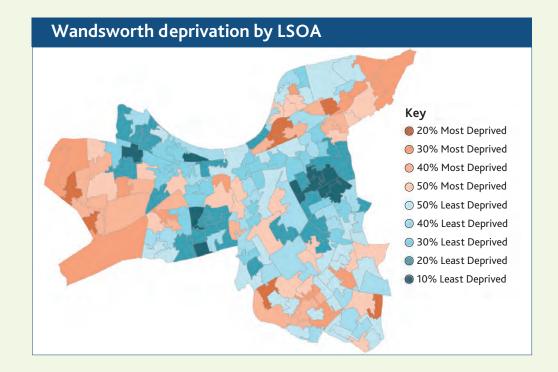




How we are doing...

Males - Thamesfield ward had the highest male healthy life expectancy at 70.5 years while the lowest was Latchmere at 57.7 years. Balham ward had the highest male life expectancy at birth at 83.3 years while St. Mary's park had the lowest at 75.7 years.

Females - Thamesfield ward had the highest female healthy life expectancy with 72.2 years while the lowest was Tooting at 60.8 years. Thamesfield ward also had the highest female life expectancy at 90 years while Nightingale had the lowest at 80.9 years



Addressing Health Inequalities:

As we start

How we are doing...

Deprivation

Overall in Wandsworth 38% of residents live within the 50% most deprived Lower Super Output Areas (LSOAs) nationally, this has improved from 47% in 2015. This figure is compared to London where over 60% of the population live in the 50% most deprived LSOAs in England. As of 2018 Wandsworth has three LSOAs amongst the 10% most deprived in London, home to 5,300 residents.

Thamesfield ward had no LSOAs amongst the 50% most deprived and the ward has one of the lowest standard mortality rates (SMR) of deaths amongst females from causes considered preventable at 75.7. The ward has the 2nd highest percentage of its population in very good health at 65% (higher than the borough average of 57%) and the lowest percentage of claimant counts aged 16+ within the borough. Thamesfield has the 3rd highest crime rate in the borough, with Northcote and Graveney wards as the top two. The ward ranked 5th highest ward in the borough for house price with the median price paid for all house types in 2019 being £715,000. It also had the lowest percentage of population with no qualifications and the lowest percentage of BAME group at 12.3% (lower than the borough average of 29%).

Balham ward had no LSOAs amongst the 50% most deprived nationally and regionally on and the ward had one of the lowest SMR of deaths amongst males from causes considered preventable at 61.4, second lowest in the borough. Balham ward had the 5th highest percentage of its population in employment at 78% and the 3rd lowest claimant count population aged 16+ years at 1.1%. In 2019, Balham ranked 3rd highest for median price paid for all house types at £756,000. The ward has the 5th lowest percentage of BAME population in the borough at 19% and the 2nd lowest percentage of fuel poverty at 5.6%.

Men living in Thamesfield ward had the highest healthy life expectancy at 70.5 years, but the lowest was seen in Latchmere with a male HLE of 57.7 years in 2009-13.

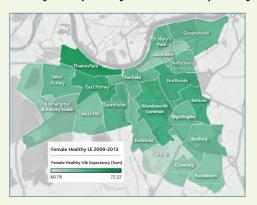
Latchmere ward has 88% of LSOAs within the 50% most deprived nationally, regionally and locally and ranked 3rd highest for SMR of deaths in males from causes considered preventable at 119.8. Latchmere ward had the 4th lowest percentage of its population in employment at 65% and the highest percentage of claimant counts aged 16+ years at 3.9%. In 2019 the ward has the 2nd lowest median price paid for all house types at £472,500. Latchmere had the third highest percentage of BAME group in the borough at 45% and the 5th highest percentage of fuel poverty at 7.6%.

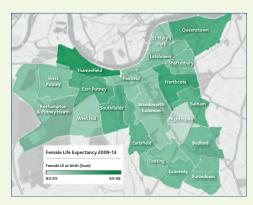
Females living in Thamesfield ward had the highest healthy life expectancy at 72.2 years in 2009-13, while Tooting ward had the lowest at 60.8 years.

Tooting ward has a large proportion of LSOAs amongst the borough's 50% most deprived and the ward's SMR of deaths from causes considered preventable was 96.5, the 6th highest in the borough. The ward ranked the 4th lowest in terms of percentage of its population in very good health, and ranked the 5th highest for crime rate within the borough. Tooting has the second lowest employment rate across the borough and the highest proportion of BAME group at 53%. The ward also had the highest percentage of households in fuel poverty at 12.5%.



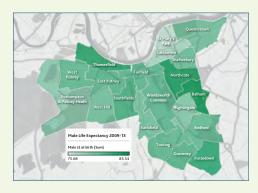
Healthy life expectancy as well as life expectancy, females 2009-2013.





Healthy life expectancy as well as life expectancy, males 2009-2013.





Children and Young People:

Going for a good start

Our earliest experiences of life, starting in the womb, through pregnancy, birth and into our early years, are vital in laying the foundations for our future health and wellbeing. Research consistently shows that even short-term improvements in physical, cognitive, behavioural and social/emotional development can lead to benefits throughout childhood and later life.

The aim for children and young people is to enable them to have the best possible outcomes in life, by ensuring they and their families have the opportunities and support they need in order to achieve these outcomes. The population of children and young people in Wandsworth (0-19 year olds) is projected to rise by 9% by 2029 (from 70,066 in 2019 to 76,619 in 2029), which will see greater demand on services in the years to come.

What we know

The Marmot Review, Fair Society, Healthy Lives, identified giving every child the best start as the highest priority in reducing the inequalities gap that exists between different groups of people. Action to reduce health inequalities needs to start before birth and be followed through the life of the child to improve adult health outcomes.



Kate's Top tips

Kate is Wandsworth's Public Health Senior Lead for Children, Sexual Health and Targeted Interventions

- · Encourage your businesses to become Breastfeeding Friendly
- · Promote your services on www.gettingiton.org.uk
- · Promote the website with young people
- · Visit www.thrive.wandsworth.gov.uk



- Walk to School Week: 1 to 31 May
- Young Carers in Carers Week: 8 to 14 June
- Men's Health Week: 10 to 15 June includes Boys and Young Men's Health
- Anti-bullying Week: 12 to 16 November
- Action Against Violence Against Women and Girls: 25 November to 10 December



What is happening in Wandsworth

- Indicators of population health and wellbeing among children and young people in Wandsworth are generally better or similar to the England average. The infant and child mortality rate are a summary measure of overall health in this population and fairs well against England averages.
- Wandsworth currently ranks 14 out of all 32 London boroughs for underweight children, but this rises to 5th place by the time a child reaches Year 6 where 2.2% of children are classed as underweight in Wandsworth compared to 1.7% in London and 1.4% in England. The prevalence of obesity increases more than three-fold between Reception (6.4%) and Year 6 (19%).
- The rates of children in need due to abuse or neglect are significantly higher than England and other London boroughs. Rates have increased over the last 3 years, from 178/100,000 in 2016 to 247.4/100,000 by 2018 and now ranks 4th highest in London.
- Smoking status at time of delivery amongst pregnant women in Wandsworth is significantly better than
 the national average, at 2.5% compared to the national value of 10.6%.
- In 2019 there were 116 schools in Wandsworth, providing education to approximately 44,920 pupils in the borough. Of these pupils, 46% were attending state funded primary schools, 26% attended state funded secondary schools, and 23% attended independent schools. The remainder make up state funded nursery pupils and special schools.
- In Wandsworth, 90% of primary school pupils and 70% of secondary school pupils attend state-funded schools within the borough itself.
- The rate of under-18 conceptions in Wandsworth have seen a substantial reduction over the last decade and have fallen more steeply than those seen at an England level. The latest data for 2018 shows that in England 16.7/1,000 young women under-18 became pregnant, a 6.2% decrease compared with 2017, and a 58% decline compared with 2008. In comparison, in Wandsworth rates have fallen by 84.1% since 1998 with a 24.7% decline between 2017 to 2018 alone. This brings the overall under 18 conception rate to just 11.3/1000 in the age group which is now lower than the average for inner London at 14.7/1000.
- 17.2% of the total pupil population in Wandsworth are recording as having a Special Education Need or
 Disability (SEND) and 2.3% of residents aged 0-24 in Wandsworth have an Education and Health Care
 Plan (EHCP) and 12.8% of pupils in Wandsworth are receiving SEN Support. In 2019, 7% of pupils with an
 EHCP reached the expected standing in reading, writing and maths compared to 40% of those with SEN
 Support.

Children and Young People:

Going for a good start

The health inequality issue

- There is a significantly greater proportion of children aged 0-15 years living in the most deprived quintile
 of Wandsworth (23.6%), compared to 0-15 year olds living in the most deprived quintile in England
 (6.1%).
- In 2017, 2,190 children aged under five were living in all out of work benefit claimant households. This
 comprised 9.8% of children living in Wandsworth of the same age.
- In 2017/18, 17% of children in Wandsworth were living in poverty. Taking into account housing costs, 36% of children in Wandsworth are considered to be living in poverty.
- Of school aged pupils, there were 6,072 pupils eligible for and claiming free school meals. Among those
 attending state funded schools, 24.3% of nursery pupils, 17.2% of primary school pupils and 16.6% of
 secondary school pupils met this criteria.
- 76.3% of children have reached a good level of development by the end of Reception, but the equivalent
 figure for children on free school meals is 60% (significantly similar to the England average for this group).
- In 2019, approximately 7,748 pupils (17.2%) had special educational needs in Wandsworth schools.
 These rates are higher than those in London (14.6%), inner London (15.8%) and England (14.9%).
 Wandsworth has remained significantly higher than the London and England rates since 2014, despite showing a steady decline since 2016.
- In Wandsworth, pupils tend to perform better than or similar to the rest of London and England in GCSEs, but lower in A-levels. 8.8% (340 persons age 16-17 years) are not in education, employment or training.
 This is higher than London and England, and there is a 1.5% gap between males than females.

Breastfeeding is an important public health priority and increasing the number of babies breastfed, ensures babies have the best possible start. Wandsworth has seen an overall improvement in breast feeding rates at 6-8 weeks after birth. In 2018/19, it increased from 26% in Q1 to 79% in Q4. The overall total for the year is 56%, which is higher than England average. The health visiting service, supported by community infant feeding leads, provides the breastfeeding service for Wandsworth.

Breastfeeding prevalence at 6-8 weeks

| 20018/19 Q1 | | Q2 | Q3 | Q4 | YTD | |
|-----------------|-----|-------|-------|-------|-------|--|
| Wandsworth | 26% | 36% | 62.5% | 79% | 56% | |
| England average | 45% | 46.4% | 46.1% | 31.9% | 42.7% | |



What we are doing

- Central London Community Healthcare (CLCH): Getting CLCH to provide the health visiting service
 for Wandsworth children from 0-19. This includes providing a service to include evidenced pathways for
 delivering each of the 6 high impact areas to all levels of family need. The high impact areas are part of
 the 4-5-6 model which provides an evidence-based framework on which health visitors who act as
 leaders of the Healthy Child Programme, can maximise their contribution. These 6 high impact areas are:
 transition to parenthood; maternal mental health; breastfeeding; healthy weight, healthy nutrition and
 physical activity; managing minor illness and accident prevention; school readiness.
- UNICEF Baby Friendly Accreditation: Wandsworth Infant Feeding leads for both the community and the hospital (St George's maternity) on this programme. To date the hospital has achieved stage 3 (full accreditation).
- Getting early years and businesses involved: To date 53 early years settings have registered on the Healthy Early Years Award Scheme with 37 now at the 'First steps stage'. Wandsworth businesses are now registered as Breastfeeding Friendly Businesses.
- National Childbirth Trust: Public Health is working with the National Childbirth Trust on a 'baby friendly' places scheme to increase breastfeeding friendly places in Wandsworth for mothers.
- Getting set: A new Health4life programme for overweight and very overweight children aged 2 to 11 and new mothers in Wandsworth. It provides support to decrease sedentary behaviours, increase physical activity and promote healthy eating.
- Getting active: 52 schools across Wandsworth are now involved with a regular running scheme; 16 of which are schools prioritised due to high levels of free school meals or in areas of deprivation.
- Getting it on: www.gettingiton.org.uk is an information and services website for young people aged 13-19 living or educated in the boroughs of Wandsworth, Richmond, Merton, Kingston, Sutton or Croydon. It provides information on sexual and mental health issues, drugs & alcohol and relationships.
- Getting ready for RE, RSE and HE or RSHE: Wandsworth Public Health Team, in partnership with the Wandle Teaching School Alliance are supporting schools to get ready for Statutory Relationships and Sex Education from September 2020.

MMR and Measles:

Shining the spotlight on measles

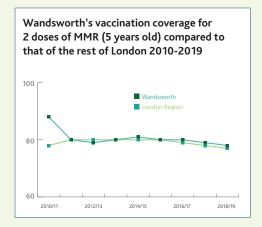
Measles is a highly infectious viral infection that can be prevented by a vaccine. Symptoms are unpleasant and lead to complications which, in some cases, can be fatal. The virus grows in the cells lining the throat and lungs and is spread by coughing and sneezing. People who catch measles develop symptoms such as a fever, cough, and runny nose (the appearance of a rash around 2 to 4 days after initial symptoms is the hallmark of the disease). It can be transmitted by an infected person from 4 days prior to the onset of the rash to 4 days after the rash erupts.

Measles can cause serious illness, especially in infants, pregnant women and immuno-compromised individuals. Serious complications are more common in children under the age of 5, or adults over the age of 30. The most serious of these include blindness, encephalitis (an infection that causes brain swelling), severe diarrhoea and related dehydration, ear infections, or severe respiratory infections such as pneumonia.



How are we doing...

At the end of 2019 into early 2020 there was a measles outbreak in Wandsworth, with over 100 suspected cases. Most of the cases were amongst school aged children, adolescents and young adults. The vaccination coverage rates remain under 90% increasing the risk of measles spreading.





What are we doing

The MMR (Measles, Mumps and Rubella) vaccine is the most effective way of protecting someone from measles. It is delivered in two doses, so those who don't get both doses of the vaccine could still be vulnerable to the infection.

Having people vaccinated against MMR not only benefits individuals but also the wider community through the process of 'herd immunity' (sometimes also called 'community immunity' or 'herd protection'). If enough people are vaccinated, it is harder for the disease to spread - this includes benefits for people who cannot have the vaccine e.g. young babies, people who are ill, those who have had an anaphylactic reaction to a dose of the MMR vaccine or those who have a weakened immune system. Therefore, if someone with measles is surrounded by people vaccinated against measles, it would be difficult for the virus to be easily passed on and more likely for it to disappear.

Wandsworth's vaccination coverage for 2 doses of MMR (5 years old) compared to that of the rest of London and England 2010-2019

Benchmarking against goal

| Period | | | Wandswort | London | England | | | |
|---------|---|-------|-----------|----------|----------|--------|----------|--|
| | | Count | Value | Lower Cl | Upper Cl | region | Eligianu | |
| 2010/11 | • | 3,525 | 86.7% | 85.6% | 87.7% | 76.6% | 84.2% | |
| 2011/12 | • | 3,476 | 79.7% | 78.4% | 80.8% | 80.2% | 86.0% | |
| 2012/13 | • | 3,668 | 78.9% | 77.7% | 80.1% | 80.8% | 87.7% | |
| 2013/14 | • | 3,960 | 79.6% | 78.5% | 80.7% | 80.7% | 88.3% | |
| 2014/15 | • | 4,036 | 82.8% | 81.7% | 83.9% | 81.1% | 88.6% | |
| 2015/16 | • | 4,225 | 82.3% | 81.2% | 83.3% | 81.7% | 88.2% | |
| 2016/17 | • | 4,204 | 83.1% | 82.1% | 84.1% | 79.5% | 87.6% | |
| 2017/18 | • | 3,989 | 80.5% | 79.4% | 81.6% | 77.8% | 87.2% | |
| 2019/10 | | 2 702 | 70 4% | 70 20/ | 90 E% | 76 20/ | 96 10/ | |

Source: Cover of Vaccination Evaluated Rapidly (COVER) data collected by Public Health England (PHE). Available from NHS Digital.

MMR and Measles:

Shining the spotlight on measles

The health inequality issue

London has the lowest vaccination coverage in England across all publicly funded, population based immunisation programmes. This is typically 5-10% compared to national figures. The reasons behind this are multiple and complex and include high population turnover, issues with data quality and reporting and service delivery issues such as a declining general practice workforce (where vaccination programmes are delivered).

Although Wandsworth has higher coverage than London, it is no exception. Other factors known to be associated with reduced uptake and coverage include income, gender, ethnicity, area of residence and maternal education. How often you move, or if your parent or carer was influenced by antivaccination messages, may influence whether or not someone is protected. When this varied coverage happens some groups of the population are more vulnerable than others.

Usually if enough people are protected the virus cannot spread, due to the effect of herd immunity. We have not yet achieved this level of vaccination in Wandsworth, so some people remain at risk of getting measles. To achieve our goal of 95% of the population receiving the second MMR dose at 5 years, an additional 246 children would need to be vaccinated in Wandsworth (based on 2017/18 annual data).



Hollie's Top tips

Hollie is Wandsworth's Public Health Lead for Health Protection

- Know your vaccination status
- Speak to your GP and ask your GP/schools when your jabs are due
- Protect yourself and your babies

Working in partnership

The Public Health Team are working with partner agencies to make sure at least 95% of the local eligible population have had their MMR vaccine. A key ingredient to successful public health intervention is working with partners. The council Public Health Team work with the local university and Wandsworth Clinical Commissioning Group to promote the MMR vaccine and provide opportunities for students to get vaccinated. Catch up MMR clinics were also set up in the Town Hall and across Battersea, Putney and Tooting.



- Reminder for school children to get MMR: September
- Flu jab season: starts in October



CASE STORY

In March 2020, to raise awareness of the need to get everyone vaccinated, we introduced a campaign called the 'Spotlight Campaign'. This involved:

- Distributing leaflets promoting the MMR vaccine to all parents who receive Headstart Magazine (23,500 copies distributed borough wide via schools).
- We held an awareness raising event Wandsworth Town Hall 'catches measles', illuminating the Town Hall with measles spots, demonstrating the need to protect against measles. Interviews and local press coverage were used to raise awareness of measles as a local issue.
- We set up community vaccination clinics to increase resident access to vaccination. There were 3
 clinics open to residents aged 12 months 50 years of age in Clapham Junction, Putney and Tooting
 areas, where they could drop in and get the MMR vaccination.
- We worked closely with the communications team and used social media to support the promotion
 of our key campaign messages, such as the vaccination clinics.
- Circulation of top tips to all GPs about improving vaccine uptake in their practice to support local promotion and access in practice.



Cllr Hampton with DPH Shannon Katiyo and members of the Public Health team



Banners circle the Town Hall

Cardiovascular Disease:

The heart of the matter

Cardiovascular disease (CVD) is the leading cause of death and a major cause of long term ill health in the UK. CVD is a collective term for a number of health conditions including diabetes, hypertension and chronic kidney disease. In Wandsworth, the number of people with CVD is influenced by both non-modifiable risk factors (eg. genetics or gender) and risk factors which, if eliminated, could reduce the risk of disease (eg. diet, income or behaviour change).

People with diabetes are more than 51% more likely to have a heart attack and 58% more likely to have a stroke. Across the UK, the increase in the number of people with Type 2 Diabetes is directly linked to the increase in obesity, with obesity accounting for roughly 80-85% of all cases of diabetes in the UK.

How are we doing...

Type 2 Diabetes:

In 2017/18 there were 14,460 people aged 17 or older who had been diagnosed with diabetes in Wandsworth. It is the leading cause of premature death in people aged under 75. Diabetes accounted for an average of 388 deaths each year between 2014-16, that's 82 of every 100,000 people.

In 2018, the estimated diabetes diagnosis rate was 60.9% for Wandsworth, the 8th worst in London. We know that 40% of people living with diabetes are undiagnosed and are at increased risk.

As well as diabetes being the leading cause of premature death in Wandsworth, it is responsible for a wide range of complications including CVD, blindness, kidney failure, nerve damage and foot disease. There is also a significant gap in how deaths from CVD affect people from different population groups in the borough, with those from more deprived areas greatest affected.

Stroke:

In 2018/19 there were 3,422 people with a history of stroke or transient ischemic attack (TIA) in Wandsworth.

Deaths resulting from stroke in those aged under 75 years in Wandsworth were 9.8 per 100,000 people, this was statistically similar to the England wide average of 12.8.

Blood Pressure:

During 2018/19 - 33,327 people were diagnosed with hypertension and recorded on GP practice registers (8.1%) in Wandsworth.

However, according to Public Health England estimates, the actual figure is more likely to be 59,660 (22.5% of the population). This means that in Wandsworth there could be approximately 26,000 people with undiagnosed hypertension who are untreated and unaware of their increased risk of CVD.



- Stress Awareness Month: April
- Walk toWork Day: April 6
- Diabetes Prevention Week: April 20-26
- On Your Feet Britain: April 24
- Diabetes Week: June 8-14
- World Diabetes Day: November 14



What are we doing

NHS Health Checks:

The NHS Health Checks programme aims to prevent heart disease, stroke, diabetes and kidney disease and raise awareness of dementia, across the local population and high risk, vulnerable groups.

The programme helps people to take action to avoid, reduce or manage their risk of developing these conditions, as well as providing opportunities to make progress in tackling health inequalities, including socio-economic, ethnic and gender.

It is available to individuals between 40 and 74 years of age without existing cardiovascular disease. Invitations can be prioritised for residents who are estimated to have a high CVD risk score (QRISK).

In Wandsworth, all 40 GP surgeries provide the NHS Health Check. During 2018/19, Wandsworth met its annual target to invite 20% of the eligible population for an NHS Health Check. In the five year cycle (2014/15 - 18/19), Wandsworth was ranked 5th best performing local authority in London for the number of invites made.

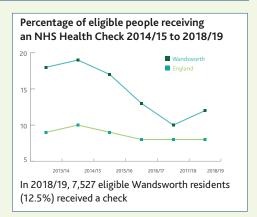
Health Checks Tips:

Contact your GP surgery to make an appointment.

Set small achievable goals to improve your cardiovascular health.

Drink less alcohol and move more often.

Try the Heart Age tool at www.nhs.uk /oneyou/ for-your-body/check-your-health/heart-age-test



Impact:

Between April and September 2019 our programme outcomes include:

- 91 residents identified with a high QRISK score
- 175 residents identified with high blood pressure
- 26 residents diagnosed as hypertensive
- **584** residents identified as obese
- 18 residents diagnosed as diabetic
- 249 residents referred to other support services including smoking cessation and exercise



Cardiovascular Disease:

The heart of the matter

Diabetes

The NHS Diabetes Prevention Programme (NDPP) is an intensive support service for people at high risk of developing type 2 diabetes. It is commissioned by NHS England, and delivered at a local level via face to face group sessions in the community or digital support for those that decline face to face sessions.

Know Your Risk Tool - The Diabetes UK Know Your Risk tool aims to help individuals find out their risk of developing type 2 diabetes within the next ten years. It is evidence-based and consists of seven simple questions related to age, gender, ethnicity, family history, waist measurement, body mass index (BMI) and blood pressure. A points system identifies people who are at low, increased, moderate or high risk of developing type 2 diabetes. Based on this score, advice is provided in the form of lifestyle changes or a GP referral.

The Know Your Risk Tool was customised for Wandsworth in partnership with Diabetes UK and the NHS Diabetes Prevention Programme in 2018. Over 2500 residents have completed the online tool since, with initial data showing that around 43% of people completing the tool had a high or moderate risk score. The tool has also been embedded within lifestyle services such as the men's weight management service, the Wandsworth Community Health Checks for stroke prevention, Stop Smoking Service and Diabetes Community Champions (see opposite). Through these services, awareness of diabetes prevention is improved and people are signposted to the tool or are supported to complete the tool through the service.

Diabetes Champions - volunteers work in Wandsworth to educate and raise awareness of diabetes and its prevention. They are responsible for organising talks, presentations, stalls and healthy living days at various community centres, fairs and festivals.





Leona's Top tips

Leona is Wandsworth's Public Health Lead for Diabetes

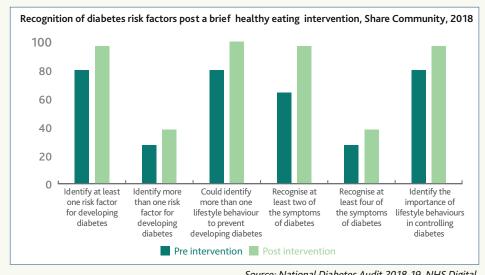
- Know Your Risk at: https://ndpp.diabetes.org.uk/c/wandsworth
- · Exercise, eat healthily and manage your weight
- If you are at risk, join a diabetes prevention group: https://preventing-diabetes.co.uk/



CASE STORY

Around 10% of people with learning disabilities (LD) have diabetes (mainly type 2) - nearly double the rate of the general population. Those with LD die on average 16 years earlier from a range of conditions compared to the general population. Share Community is a charity based in Wandsworth delivering learning, living and wellbeing programmes to those with LD, giving them opportunities, greater choice and independence, and supporting them to live happier, healthier lives.

Public Health worked with Share Community and Wandsworth's Diabetes Champions to deliver a tailored healthy eating session for its students. This used resources and activities to explain diabetes and its relationship with diet and physical activity. The chart sets out the very successful outcomes from the project.



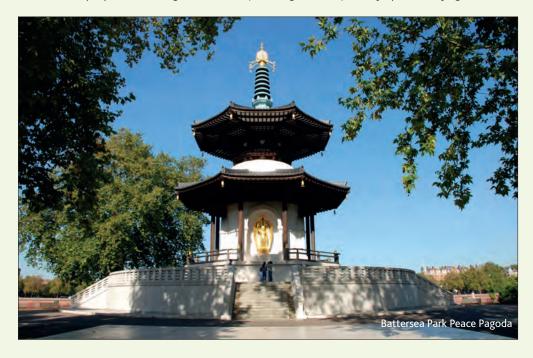
Source: National Diabetes Audit 2018-19, NHS Digital

Mental and Emotional Help:

With a little help from my friends

The issue

- One in four people will suffer with some form of mental health difficulties in their lifetime, including
 anxiety, depression and other conditions. Being mentally healthy involves being happy, being able to
 enjoy work, relationships and being able to cope in difficult situations, and is NOT just the absence of
 mental illness.
- Psychoactive substances can provide a short term sense of mental wellbeing and relief from psychological and physical pain.
- Recent evidence had shown that approximately two-thirds of people experiencing mental health issues
 have not been receiving treatment for their problems, missing the early intervention and treatment
 which would lead to better outcomes in mental health. Part of this reason is the difficulty for Londoners
 to seek support during working hours and the reluctance of some to access traditional medical or
 psychological models of care.
- Half of the people with lifelong mental illness (excluding dementia) were symptomatic by age 14.





What we know

Our mental health and wellbeing is influenced by our individual characteristics such as our age, personality, gender or genetics. However, our experiences, surroundings and the environment in which we live are also factors. Good mental wellbeing is closely linked to good mental health but they are not the same thing. Mental Health is about how we think, feel, behave and interact with others. Wellbeing refers to the state of a person being comfortable, healthy and happy. We can also think of wellbeing as feeling good, functioning well and having good emotional status.

Feeling good - experiencing positive emotions like happiness, enjoyment and satisfaction as well as feeling curious, engaged and safe.

Functioning well - being able to engage with society by having social connections, enjoying good relationships with others, feeling in control and having goals and aspirations.

Having poor mental health does not always mean a poor sense of wellbeing. People with mental illness may experience good wellbeing. However, they are more likely to experience low wellbeing more often than someone with good mental health.

Supporting people who experience low levels of wellbeing may help stop mental illness from developing, particularly depression, stress and anxiety problems. Similarly, improving the wellbeing of people with mental ill health can support their recovery and improve their health.



Graeme's Top tips

Graeme is Wandsworth's Public Health Lead for Health Protection, Learning Disabilities, Mental Health and Substance Misuse

- Be kind to yourself and others
- Follow the 'Five ways to wellbeing' Give, Connect, Learn, Notice and Be active
- · Book a Mental Health First Aid training course
- Be zero suicide aware www.zerosuicidealliance.com/training
- If you are feeling down, stressed, or having problems sleeping speak to your GP
- Try Mindfulness

Mental and Emotional Help:

With a little help from my friends

What is happening in Wandsworth

- The estimated prevalence of common mental disorders in those aged 16 and over is 18.8 per 100 in Wandsworth, higher than the national value of 16.9 per 100, highlighting the ongoing need to focus on mental health. The suicide rate in Wandsworth is 9.6 per 100,000, which is level with the rate in England.
- The rate of emergency hospital admissions for intentional self-harm is 84.9 per 100,000, which is an
 improvement compared to the national value 193.4 per 100,000. A higher proportion, 22.2% of
 Wandsworth's population reports a high anxiety score, compared to 19.7% of the general population.
 Wandsworth residents reported better or similar scores, compared to London's overall in 2018/19 (67.6%).
- There is also an association of chronic physical conditions being linked to mental health problems, with 29.1% of Wandsworth's population with long-term musculoskeletal problems also reporting depression and anxiety, compared to a national value of 24.1%.
- There were just over 1200 admissions related to alcohol related mental health and behavioural disorders in 2018/2019.
- The majority of the local population are leading happy and worthwhile lives, with 92.2% of men and 90.3% of women in Wandsworth stating they felt generally happy, a proportion that is better than the London average. Despite this, one in five report low happiness or satisfaction and high anxiety scores.
- A survey in 2018/19 on personal wellbeing scores, when compared to 2011/12, revealed Wandsworth
 residents' average satisfaction, worthwhileness and happiness score had increased.





What are we doing?

- Promoting Alternative Thinking Strategies (PATHS) is a social and emotional learning programme for
 primary schools. The programme has been shown to work through randomised control trials. Children
 who engage with the programme are better able to manage feelings and emotions, solve problems and
 experience higher levels of empathy than pupils who have not engaged with the programme. PATHS is
 currently being delivered in 14 schools across the borough.
- Mental Health First Aid Training (MHFA) is an internationally recognised training course, designed to
 teach people how to spot the signs and symptoms of mental ill health and provide help on a first aid
 basis. In the same way as learning physical first aid, MHFA teaches people how to recognise those crucial
 warning signs of mental ill health and feel confident to guide someone to appropriate support. They also
 offer one to one therapy with registered therapists and counsellors.
- The Good Thinking Programme A programme developed by Public Health England as outlined in London Health and Care Vision:
 - "Good Thinking is a pan-London initiative driven by local government, the NHS and Public Health England to provide a digital mental wellbeing service. It has provided more than 300,000 Londoners with self-care support to tackle sleep, anxiety, stress and depression. This powerfully demonstrates multi-agency collaboration to meet local need, innovation to use new channels to reach people we have not traditionally reached, and an ability to influence the wider national policy agenda through the approach taken to the Every Mind Matters campaign".
- Developed a local council suicide prevention strategy that sets out key plans to support mental and emotional health.
- The recent substance misuse strategy commissions services for people with dual diagnosis.



- Mental Heath Awareness Week: 18 to 24 May
- Smile Health: mid May to mid June
- World Suicide Prevention Day: 10 September

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