

Report for: Joint Health and Wellbeing Board Sub Committee

Date: 9 October 2017

Title: Consultation on the Mayor's Health Inequalities Strategy

Report

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1.0 Purpose

This paper notes the launch of the consultation on the Mayor of London's Health Inequalities Strategy. The Joint Health and Wellbeing Board is asked to consider the priorities set out in the strategy and discuss the opportunities to take action in support of the strategy.

2.0 Recommendation

The Board is asked to support the development of a joint Islington-Haringey response to the consultation, and to identify the key issues the Board wishes to highlight as part of that joint response. Specifically, the Board is asked to consider the consultation questions set out in section 3.2.

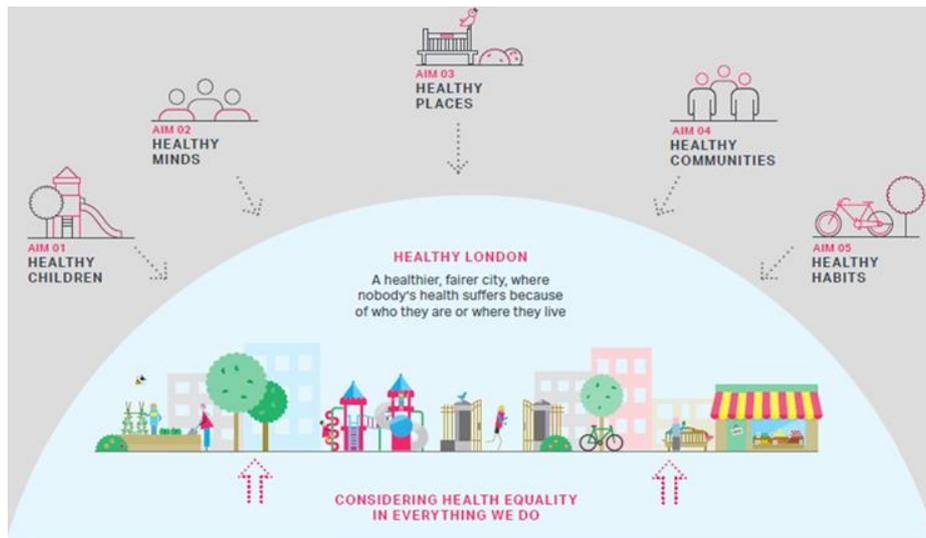
3.0 Background

The Mayor's Health Inequalities Strategy consultation launched on 23 August 2017 for a period of 3 months to November 30th. The health inequalities strategy is one of seven strategies that the Mayor of London is mandated by Parliament to develop. In developing these strategies, the Mayor must meet a set of specific statutory requirements to consider their impact on health, health inequalities, climate change and sustainable development, as well as meeting the public sector equality duty which applies to all of the GLA's functions.

The length of time that Londoners can expect to live in good health varies widely across the city. The overarching aim of the strategy is to end this unfair inequality whilst also improving the overall health of all Londoners.

3.1 Strategic Themes

To achieve its aim of ending unfair inequalities in health in London, the Health Inequalities Strategy consultation document has five key themes: Healthy Children, Healthy Minds, Healthy Places, Healthy Communities and Healthy Habits. These areas were agreed through a process of early engagement and consultation with a wide range of stakeholders. An overview of the strategy's aims and draft objectives is provided in Annex 1.



3.2 The consultation process and key questions

The deadline for the formal consultation process is 30th November. During this time, responses to the Mayoral strategy from partners and the public are being sought in a number of ways:

- Public engagement: e.g. through [Talk London](#) and a London.gov poll
- Feedback via an online consultation
- Engagement with statutory consultees
- Stakeholder engagement through attending existing meetings or bespoke workshops/events
- Working with partners to develop a set of indicators for monitoring progress.

This strategy aligns closely with the ambitions set out in other mayoral strategies, and where there are cross cutting issues, such as air quality, the GLA team is working closely with the respective policy leads across these various Mayoral strategies to ensure a coordinated approach to stakeholder consultation, as well as ensuring indicators/ metrics for monitoring progress are aligned between strategies where appropriate.

In considering the draft Health Inequalities Strategy, the consultation is asking partners and the public to consider the following questions:-

- Are the ambitions right?
- Is there more that the Mayor can do to reduce health inequalities in London?
- What can we do together that would reduce health inequalities in London?
- What support would you & your organisations need to do this?
- Are there any gaps in the strategy?
- What are the particular high priorities for your local communities?

Following analysis of the consultation responses at the end of November, the Mayor will publish a final health inequalities strategy and delivery plan, including a core set

of health inequality indicators. Through the consultation process, the mayor and GLA team are also hoping to collate any offers for action received from partners and stakeholders in support of the strategy, so that these can be reflected within the wider delivery plan.

4.0 Contribution to strategic outcomes

In Haringey and Islington, tackling inequalities in health is at the heart of our health and wellbeing strategies and partnerships. Deprivation and disadvantage is a major determinant of poorer health and shorter lives in both our boroughs, and there are significant inequalities across a wide range of health outcomes both between Haringey and Islington and the rest of London and England, but also significant within-borough inequalities as evidenced by our Joint Strategic Needs Assessment.

This consultation on the Mayor's health inequalities strategy provides the joint Health and Wellbeing Board with an opportunity to reflect on the major drivers of health inequalities at both a London level but also in our local communities, and the key priorities for action to address those inequalities and improve the length and quality of lives of all our residents.

Moreover, addressing the challenges set out in the strategy will require more than any one organisation can achieve in isolation. The strategy goes beyond the statutory duty of the Mayor and provides an opportunity for partners, organisation and individuals across London to come together to take action to reduce health inequalities.

5.0 Statutory Officer Comments (Legal and Finance)

Legal

The Mayor of London has a duty to promote a reduction in health inequalities, and to develop and lead a pan-London health inequalities strategy, working with partners such as Islington and Haringey Councils to implement the strategy (sections 309E and 41 of the GLA Act 1999).

Chief Finance Officer

There are no direct financial implications to Islington Council from implementing this strategy.

Any future action that Islington Council decides to take in order to further the strategic objectives set out in this report will need to be managed from within relevant existing budgets.

Any details relating to such actions will be assessed for financial implications as and when they arise.

6.0 Environmental Implications

There are several environmental implications of the work required to achieve the objectives in the Mayor's Health Inequalities Strategy related to both capital improvements and office work (energy/water/resource use and waste generation). However, the strategy also has several positive environmental implications, including improving air quality, encouraging walking and cycling, increasing greenspace, shade and shelter (which also contributes towards climate change adaptation), improving the energy efficiency of housing and reducing smoking rates (which in turn reduces litter).

7.0 Resident and Equalities Implications

The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). This applies to the protected characteristics of age, disability, gender reassignment, marriage and civil partnership (only in regards to discrimination, harassment and victimisation), pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation.

The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

An Integrated Impact Assessment has been completed by the GLA for the Mayor's Health Inequalities Strategy. A local Resident Impact Assessment or equality impact assessment is not considered necessary at this time, as this report is concerned with developing a local response to a London-wide consultation. The proposals and priorities described in the strategy should have an overall positive impact on local residents' health and wellbeing, and on inequalities in health experienced by different population groups. Any future changes to local services and programmes that follow on from and are designed to align with and support delivery of the final Mayor's Health Inequalities Strategy, would be subject to a local resident impact assessment or equality impact assessment.

8.0 Appendices

Appendix 1 – overview of strategy aims

Appendix 2 – Health Inequalities Strategy slides

Appendix 1: Overview of strategy aims

AIM 1, healthy children: every London child has a healthy start in life

Draft objectives:

- London's babies have the best start to their life
- Early years settings and schools support children and young people's health and wellbeing.

Key Mayoral ambition:

- Launching a new health programme to support London's early years' settings, ensuring London's children have healthy places in which to learn, play and develop.

AIM 2, healthy minds: all Londoners share in a city with the best mental health in the world

Draft objectives:

- Mental health becomes everybody's business across London
- The stigma associated with mental ill-health is reduced, and awareness and understanding about mental health increases
- London's workplaces are mentally healthy
- Londoners can talk about suicide and find out where they can get help.

Key Mayoral ambition:

- To inspire more Londoners to have mental health first aid training, and more London employers to support it.

AIM 3, healthy place: all Londoners benefit from a society, environment and economy that promotes good mental and physical health

Draft objectives:

- Improve London's air quality
- Promote good planning and healthier streets
- Improve access to high quality green space and make London greener
- Address poverty and income inequality
- More Londoners are supported into healthy, well paid and secure jobs
- Housing quality and affordability improves
- Homelessness and rough sleeping is addressed.

Key Mayoral ambition:

- To work towards London having the best air quality of any major global city.

AIM 4, healthy communities: London's diverse communities are healthy and thriving

Draft objectives:

- It is easy for all Londoners to participate in community life
- All Londoners have skills, knowledge and confidence to improve health
- Health is improved through a community and place-based approach
- Social prescribing becomes a routine part of community support across London
- Individuals and communities supported to prevent HIV and reduce the stigma surrounding it
- TB cases among London's most vulnerable people are reduced
- London's communities feel safe and are united against hatred.

Key Mayoral ambition:

- To support the most disadvantaged Londoners to benefit from social prescribing to improve their health and wellbeing.

AIM 5, healthy habits: the healthy choice is the easy choice for all Londoners

Draft objectives:

- Childhood obesity falls and the gap between the boroughs with the highest and lowest rates of child obesity reduces
- Smoking, alcohol and substance misuse are reduced among all Londoners, especially young people.

Key Mayoral ambition:

To work with partners towards a reduction in childhood obesity rates and a reduction in the gap between the boroughs with t