

**SUNDERLAND HEALTH AND WELLBEING BOARD**

**25 June 2020**

**DRAFT SUNDERLAND COVID-19 HEALTH INEQUALITIES STRATEGY**

**Report of the Director of Public Health**

**1.0 Purpose of the Report**

- 1.1 The purpose of the report is to consult the Health and Wellbeing Board on the draft Sunderland COVID-19 Health Inequalities Strategy.

**2.0 Introduction/ background**

- 2.1 Under the Health and Social Care Act 2012, the Council has responsibility for improving the health of the population in Sunderland and reducing health inequalities.
- 2.2 People facing the greatest deprivation are experiencing a higher risk of exposure to COVID-19 and existing poor health puts them at risk of more severe outcomes if they contract the virus. According to the ONS data people from the most deprived areas of England and Wales are more likely to die with coronavirus than those in more affluent places. The government and wider societal measures to control the spread of the virus and save lives now (including the lockdown, social distancing and cancellations to routine care) are exacting a heavier social and economic price on those already experiencing inequality.
- 2.3 The strategy sets out Sunderland's response to COVID-19 and the impact on health inequalities. It builds on previous strategies where health inequalities have been identified including the City Plan, Sunderland Health and Wellbeing Strategy and Director of Public Health Report 2019. The COVID-19 Health Inequalities Strategy aims to:
- Raise awareness of the importance of health inequalities in both the response and recovery to COVID-19
  - Follow the key principles set out in the Healthy City Plan and use data, intelligence and evidence to systematically understand the natural and unintended consequences that may have widened health inequalities
  - Support local organisations and communities to consider how their work may impact on health inequalities, as described in the Sunderland Prevention and Health Inequalities Framework
  - Consider the evidence to ensure that any recommendations will prevent or mitigate health inequalities widening as part of the COVID-19 pandemic.
- 2.4 There is a danger that in our response to COVID-19 we abandon our community asset-based approach to reducing health inequalities as set out in the Healthy City Plan. It is an opportunity to accelerate the approach by using and responding to local intelligence, building on relationships and resident

experiences gathered as part of the City's immediate response from volunteers (existing and recruited as part of the response), shielded call themes, risk assessments on our vulnerable young people and any other sources of intelligence.

2.5 The strategy details a range of actions the local authority and partners could take to help to mitigate the differential impact of COVID-19 on local communities and outlines a number of strategic objectives, which are:

- To continue to improve health outcomes for our most disadvantaged communities who are at greater risk of COVID-19 by adopting a lifecourse approach which identifies the key opportunities for minimising risk factors and enhancing protective factors through evidence-based interventions at key life stages, from preconception to early years and adolescence, working age and into older age.
- To take every opportunity to mitigate the impact that COVID-19 has had on our communities by building on a Health in All Policies (HiAP) approach to policies we systematically and explicitly consider the health implications of the decisions we make with the aim of improving the health of the population.
- To ensure that as we move into recovery we take the opportunity to address health inequalities as part of our plans by using available tools to ensure that health inequalities are considered for every policy and service.

### **3.0 Public Health England - Disparities in the risk and outcomes from COVID-19**

3.1 Since drafting the local strategy, Public Health England have published 'Disparities in the risk and outcomes from COVID-19'. The document confirms the impact of COVID-19 on existing health inequalities and it concludes that in some cases, has increased them. These results improve our understanding of the pandemic and help formulate the future public health response to it.

3.2 They found that the largest disparity was:

- By age - among people already diagnosed with COVID-19, people who were 80 or older were seventy times more likely to die than those under 40
- The risk of dying among those diagnosed with COVID-19 was higher in males than females - however in the North East females had higher diagnosis rates than in London
- By deprivation - higher in those living in the more deprived areas than those living in the least deprived
- By ethnic group - higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups.

3.3 When compared to previous years, they found a particularly high increase in all cause deaths among those in a range of:

- Caring occupations including social care and nursing auxiliaries and assistants

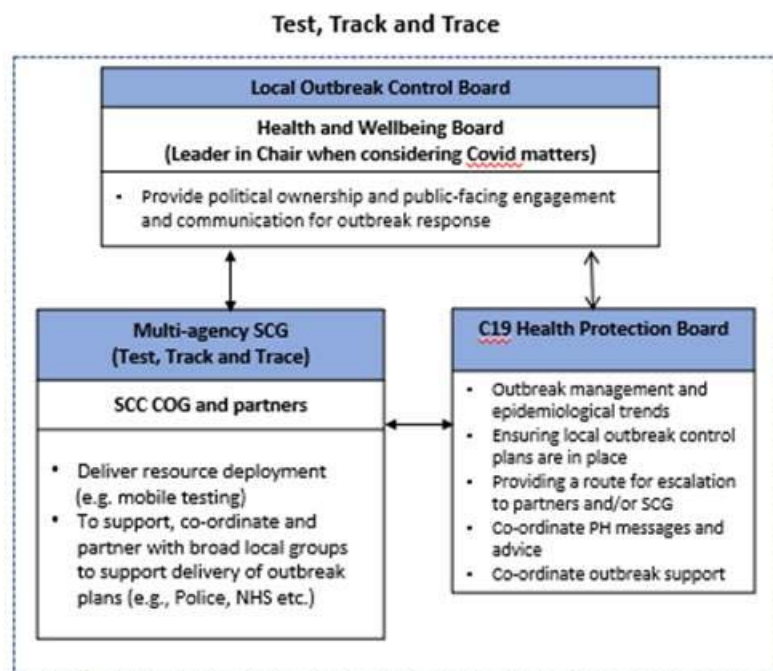
- People who drive passengers in road vehicles for a living including taxi and minicab drivers and chauffeurs
- Those working as security guards and related occupations
- Those in care homes.

3.4 The Public Health England document reinforced what we found when developing our local strategy for Sunderland.

3.5 The draft strategy has been discussed at Cabinet and has been shared with members of the Health and Wellbeing Board.

## 4.0 Local COVID Control Arrangements

4.1 As the draft strategy collates the evidence and intelligence in to one document this will support the council and partners in understanding the pandemics impact on the key at risk groups. The draft strategy will inform the response from our local COVID control arrangements which will be through the COVID-19 Outbreak Control Board, Multi-agency SCG and COVID-19 Health Protection Board outlined in the governance structure below.



## 5.0 Recommendations

5.1 The Health and Wellbeing Board is requested to:

- endorse the draft Sunderland COVID-19 Health Inequalities Strategy
- commit to addressing health inequalities in the organisations represented on the Board.

