

# Minding the Gap

Improving Health & Reducing Inequalities



## Yorkshire and the Humber Health and Wellbeing Monthly Update

Issue 99 – March 2024

Welcome to the Yorkshire and the Humber Health and Wellbeing Monthly Update. This update is our way of sharing any good and emerging practice, new developments, updates and guidance. The update forms part of the Minding the Gap newsletter.

This update is structured around four overarching themes:

- ❖ **populations**
- ❖ **determinants of health and risk factors**
- ❖ **priority conditions and equitable services and**
- ❖ **workforce development.**

If you have received this and are not already on the Minding the Gap distribution List, **please sign up to our newsletter [here](#).**

*Disclaimer: Please note, the Minding the Gap programme is led and funded by the Yorkshire and the Humber Association of Directors of Public Health (YH ADPH). This programme is co-ordinated by the Yorkshire and the Humber Health and Wellbeing Team in the Office for Health Improvement and Disparities (OHID) and does not reflect the position or views of OHID or the Department of Health and Social Care.*

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## POPULATIONS

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**Improving outcomes and reducing inequalities for children & young people**

**Regional Lead: Gemma Mann**

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No updates this month.

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**Promoting healthy ageing across the lifecourse**

**Regional Lead: Ali Iliff**

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### **Age Without Limits Action Day: 20<sup>th</sup> March 2024**

The first Age Without Limits Action Day takes place on 20<sup>th</sup> March 2024 and is a chance for everyone to do something to change the way we all think and act about age and ageing. You can get more information [here](#) about the action day, the Age Without Limits campaign and how to get involved.

### **Cold at home: how winter cost-of-living pressures continue to impact older people**

This [report](#) from Age UK highlights concerns about the ongoing impact of the cost-of-living crisis on older people who are not receiving support from the benefits system. Many of these people are likely to be eligible for support but will still be missing out for a variety of reasons. Government figures show that an estimated 800,000 pensioners are eligible for Pension Credit but are missing out on this much-needed support.

### **Research in Dementia – Opportunity to Participate**

Social care provision for people with young onset dementia and their supporters: the DYNAMIC study (University of Bradford, funded by the NIHR). Are you interested in helping to improve social care for people with young onset dementia? The DYNAMIC study is seeking to better understand current social care planning and provision for people with young onset dementia in England. They are looking for people who have a role in or an awareness of adult social care planning, provision, management, or commissioning to complete a quick online survey (will take no more than 10 minutes).

You can access the survey [here](#). The information from the survey will be used to create recommendations and resources for improving social care provision for people living with young-onset dementia.

### **Age Innovators podcast**

This new [podcast series](#), from the Innovate UK Healthy Ageing Community of Practice, uncovers the motivations and challenges faced by innovators working in the healthy ageing field. Episode 1 considers the language of care, and episode 2 focuses on supporting healthy ageing at work. Further episodes will follow.

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## Improving outcomes and reducing inequalities for inclusion health groups

### Regional Lead: Cathie Railton

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### Resources, information and guidance

#### Migration Headlines, March 2024

Each quarter our Migration Yorkshire colleagues provide a brief update for health partners regarding migration issues to support our work. Embedded below is the most recent one.



Migration%20Yorkshire%20migration%20

#### Migration Yorkshire's dashboard

This dashboard provides data on the different Home Office schemes [here](#). Some data can be filtered to local authority and sub regional levels.

Combined data on different schemes by LA can be accessed on [GOV.UK](#)

#### Funding for Home Office migrant schemes

Embedded below the updated spreadsheet which details the various Home Office migrant schemes with details about funding, including health where there is specific funding. This was put together by Migration Yorkshire.



HO%20and%20health%20funding%20review

#### VCSE Health and Wellbeing Alliance resource library

[The Voluntary, Community and Social Enterprise \(VCSE\) Health and Wellbeing Alliance](#) is a national partnership between voluntary sector representatives and the health and care system. It is jointly managed and funded by the DHSC, UKHSA and NHSE. The Alliance has launched a resource library showcasing member's health inequalities projects. The [library](#) is organised by theme and details lots of useful information to support inclusion health work.

#### Physical and mental health support available for people seeking asylum

The Home Office has published this [information](#) for asylum seekers which sets out the roles and responsibilities of different organisations in relation to health that can be accessed.

#### The Mental Health of Asylum Seekers and Refugees in the UK: The Mental Health Foundation, 2024

[This report](#) looks at the role of government and the social and economic conditions in which refugees and asylum seekers live, not just pre migration but also post-migration which have a powerful influence on their mental health. Experiences of poverty, financial insecurity, unemployment, lack of adequate housing, social

isolation, loneliness, prejudice, stigma, and discrimination are all wider determinants of mental health that need to be addressed.

### **Digital inclusion and exclusion - Groundswell**

Groundswell's Listen Up! lived-experience led project has published new research into digital inclusion and exclusion for people with experience of homelessness. Drawing on interviews with 34 people experiencing homelessness and a selection of stories from 6 community reporters, the research explores how homelessness limits access to digital essentials, and why day centres are a digital lifeline, providing essential opportunities to communicate digitally with health services alongside the specialist support needed to build skills, trust and confidence.

Click [here](#) to take a look.

### **New statutory guidance for discharge from mental health settings**

[This guidance](#) from DHSC recommends organisations across the health system collaborate to ensure effective discharge planning and the best outcomes for people who are discharged from hospital, and that people and their chosen carers are fully involved in the process. The guidance includes best practice around joint working on discharge planning between NHS Trusts, ICBs and local authorities, and clarifies roles, responsibilities and funding.

There is specific guidance around patients who are experiencing or at risk of homelessness, with references to both the [NICE guidelines](#) and to the 'Duty to Refer' in the Homelessness Reduction Act. There is also guidance for people with 'co-occurring mental health and drug and/or alcohol conditions' recommending a 'no wrong door' and 'everyone's job' approach.

For more information see Pathway's report: '[Beyond the Ward – Exploring the Duty to Refer in Hospital Settings](#)'.

### **Learning and events**

#### **Sustain event: Food experiences of people seeking asylum in London: areas for local action**

Following the publication of their [report](#), Sustain held a webinar to share the findings from their work which explored the food experiences of people seeking asylum in London. You can listen to the webinar [here](#) and the slides are embedded below. Whilst London based, the recommendations are relevant to any region and support the work we did here around [nutrition in contingency accommodation](#).



Sustain webinar  
slides.pdf

#### **Stand up! Speak out! Solidarity Knows No Borders Training Series 2024**

You can join the above free, online training series which runs online from March-July 2024. Find out more [here](#).

## Various

### **PhD Fellowship / Sanctuary fully funded scholarship for Middle Eastern researcher at University of Leeds**

Please see more information [here](#). The deadline for application is 29<sup>th</sup> April 2024.

### **Deadly experiment? UK asylum sites criticised for 'horrific' level of despair – article in the Guardian**

[This article](#) looks at the impact of current accommodation settings on asylum seekers mental health.

### **Updated dashboards on homelessness**

Please see the above quarterly homelessness dashboards from DLUHC [here](#).

### **Consultation: General Dental Council (GDC) powers to provisionally register dentists with overseas qualifications**

DHSC have launched a public consultation on new proposals to give the General Dental Council (GDC) powers to provisionally register dentists with overseas qualifications. Provisional registration would allow an overseas-qualified dentist to practise in any dental setting, including high street dental practices, under the supervision of a dentist who has full registration on GDC's dentists register.

To give your views see [here](#).

### **Comic Relief offers funding for UK groups working with refugees and asylum seekers in the UK**

Comic's new funding programme, Re-Rooted: Safety and Security for Refugees and Asylum Seekers, is offering grants of up to £200,000 over three to five years for UK organisations with an income of between £250,000 and £10 million. The aim of the Re-Rooted funding call is to help UK organisations address the challenges faced by the migration sector and to support refugees and asylum seekers to rebuild their lives safely and securely in the UK. The programme offers flexible, core funding for organisations that specialise in supporting refugees and asylum seekers in the UK so that they can continue and reinforce the good work of their organisation.

The funding is for proposals which focus on the following:

- Services and support for refugees and asylum seekers.
- Influencing and advocacy focusing on safer routes and improved outcomes for refugees and asylum seekers.
- Or a combination of both.

The deadline for applications is 26 March 2024. Full details [can be found here](#).

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# DETERMINANTS OF HEALTH & RISK FACTORS

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**Creating and developing healthy and sustainable places and communities**  
Regional Lead: Karen Horrocks

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## **A qualitative synthesis of practice-based learning from case studies on COVID community champion programmes in England, UK**

This [synthesis of practice-based case studies](#) confirms that the community champion model was adaptable when developing local community-centred responses to reduce inequalities and improve access to vaccines. It is worth a read if you are interested in this type of community approach or are considering case study analysis as a method of evaluation.

## **Transport for the North (TfN): Transport and Social Exclusion in 23/24- Report and launch video**

On Wednesday 21st February TfN launched their latest report into transport-related social exclusion in the North of England in 2023/24. The report is now live and can be [read here](#). As part of the launch, they have put together a YouTube explainer of the findings and research which can be [viewed here](#) and is highly recommended for anyone interested in transport, health, and inequalities.

## **Online Event: Future-proofing: how can the Future Generations Act transform Wales? Tuesday 7<sup>th</sup> May 2024**

As it approaches its 10th year, Future Generations Commissioner Derek Walker joins NESTA to talk about progress and the work that still needs to be done in this [free online event](#).

## **Town and Country Planning Association (TCPA) Conference Tuesday 18 June (10.00 am – 5.00 pm)**

The TCPA will be hosting a FREE in-person conference in Birmingham.

This event will explore the relationship between children, young people and the built environment, the critical importance of creating healthy places in which children and young people can thrive, challenges and opportunities, and highlight case studies of place-based practice from local authorities and the private sector. The agenda will be announced shortly. This event has kindly been supported by Sport England.

If you would like to join the waiting list and be notified when tickets become available, please contact Abi at [abigail.grove-white@tcpa.org.uk](mailto:abigail.grove-white@tcpa.org.uk).

## **Permitted development, housing and health: a review of national policy and regulations**

This [technical review](#) examines national policy, guidance, building and housing regulations in England, how they relate to the quality of housing created through permitted development, and the potential health effects.

## **People, planning and place**

The TCPA's Director of Healthier Place-Making, Julia Thrift, joins Climate Change and Decarbonisation Lead at Gloucester City Council, Jon Burke, [in this episode of the](#)

[Movement is Life podcast](#) to discuss low-traffic neighbourhoods and 20-minute neighbourhoods.

### **Keep it Local for Better Health launch webinar**

Last week, Locality launched their latest guidance on the role of local VCSE organisations in the health system.

If you missed the webinar, here's your chance to catch up on [the recording](#) and [the report](#).

### **Sign up to the Active Travel England mailing list**

If you are interested in active travel and want to hear about new webinars and reports. Sign up to the newsletter [here](#).

### **2 quick reads: Systems thinking and housing**

In this [short article](#), Faye Sanders (University of Bath) advocates for a shift to systems thinking in housing research, highlighting the interconnectedness of interior, neighbourhood, and external factors for improved well-being. Also, in this [article](#) Prof Alex Marsh delves into the intricate challenges of global housing systems, emphasising affordability crises, budget strains, supply shortages, and interconnected issues.

### **Equalities led social housing podcast from UK Collaborative Centre for Housing Research**

In this [podcast](#) there is a conversation with Francis Burrows, Director of Support and Service Development for Housing Association Orbit. Francis talks about the work the organisation does to engage with their tenants, particularly underrepresented groups, and how that work informs their policies and processes in how they support them.

## **Climate Health and Sustainability**

### **Local Climate Adaptation Tool – recently launched**

[This interactive, visual tool](#) allows you to explore how local climates will change, what health and community impacts may occur, who is most vulnerable and which adaptations to consider – informed by the scientific research. It supports local decision makers across the UK to plan and adapt to climate change.

Despite the growth in evidence on the health effects of climate change, information about climate and health are reported to not be easily accessible, or transferable to local contexts, by Local Authority Public Health professionals.

The Centre for Climate and Health Security (CCHS) interviewed local authority public health professionals to better understand current practice and their perspectives of working on climate change and health. You can access the briefing below.

### **Role of public health professionals in the climate and ecological crisis: a qualitative study – BMJ journal article**

This publication highlights the need to urgently address existing barriers to enable this important part of the public health workforce to play their role in tackling the climate and ecological crisis.



Please read [here](#).

### **Child health inequalities and climate change – Position statement, tool and report**

Climate change poses an existential threat to the health and wellbeing of children and young people. The RCPCH have asked the four UK Governments: make child health central to climate policy development. To help make this a reality they have provided tools alongside a report “Preserving the world for future generations” giving an insight into how children and young people - in the UK and internationally - perceive and understand climate change. The tools outline the evidence: how climate change impacts on children and young people’s health in the UK, and how it exacerbates health inequalities whilst encouraging us as health professionals to influence decisions within systems and institutions.

Please find these materials [here](#).

### **What are the impacts of local authority led interventions aimed at climate change mitigation and/or adaptation on health and inequalities? - NIHR funded call**

UKHSA Centre for Climate and Health Security (CCHS) notes the following NIHR call for funding (Stage 1 deadline 23<sup>rd</sup> April). The ambition of CCHS is to ensure the health harms from climate change and adverse weather are minimised, and to improve health for all people, across current and future generations. In particular, they are keen to support research on the following:

#### Framing:

- Climate change is opportunity to redefine the social and environmental determinants of health
- Co-benefits
- Interventions that mitigate the impact of climate change have the potential to reduce health inequalities by reducing risk factors that are more prevalent among disadvantaged groups
- Population groups who are likely to experience the most severe impact of climate change are the least likely to engage due to tangible and intangible barriers.

#### Consider whole remit of LA

- E.g. Transport, planning, housing, green and blue space management.

#### Research areas of interest

- Evaluations or modelling of the impact on health of Local Authority actions to mitigate impacts of climate change (including health economic evaluations)
- Evaluation of interventions acting on the acceptability, to the public, of climate change actions, particularly in under-served groups

#### Evaluations of interest

- Barriers and facilitators of local interventions
- Scaling up of interventions
- Behaviour change



- Health and non-health costs and benefits of investing in mitigation/adapt
- Perceptions and understandings of Climate change and health across communities
- The effectiveness of community engagement in this area and the role of the perception of 'fairness' in public acceptability

Deadline for stage 1 is Tuesday 23<sup>rd</sup> April.

If you are a Local Authority who is preparing a bid and would like to explore whether support from CCHS would be helpful, please get in touch via [CCHS@ukhsa.gov.uk](mailto:CCHS@ukhsa.gov.uk).

### **Carbon Literacy Training**

[The Carbon Literacy Project](#) is the largest climate education charity, operating globally from Manchester. It has been developed primarily for the NHS, but it is aimed at all health related staff.

It is free for NHS England organisations until 2026. Please contact [helen.taylor@carbonliteracy.com](mailto:helen.taylor@carbonliteracy.com) (Healthcare Coordinator) for more information. Helen is promoting the Healthcare Toolkit comprising of e-learning courses that are both generic and support leadership.

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## **Achieving our Smokefree 2030 ambition**

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### **Creating a smokefree generation - briefing for parliamentarians - Smokefree Action (SFAC)**

The SFAC has produced a brief for parliamentarians on raising the age of sale, endorsed by leading health organisations including Mind, Action on Smoking and Health (ASH) and the Royal College of Physicians. The briefing counteracts six key arguments made by the tobacco industry one by one.

Please see more and read the brief [here](#).

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## **Preventing Gambling-Related Harm Regional Lead: Simone Arratoonian**

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### **Consultation outcomes**

During February, the Department for Culture, Media and Sport (DCMS) released the [results of the consultation](#) from Sept 2023 which included proposals to change the stake limits for online slots in GB to between £2 and £15 per spin. These games contribute a large proportion of profit for the gambling industry and are associated with increased risks of harm. Some of this harm is attributed to the way these games are played – with people spending long sessions on them with the potential to lose large sums in minutes; however, other mechanisms such as speed of play increase their addictive potential, and these products are also heavily marketed and cross-sold.

The outcome of the consultation proposed introduction of changes bringing the maximum stakes to £5 per spin for adults aged 25 and over; and £2 per spin for adult aged 18-24. The rationale for these amounts is to 'achieve the government's stated objectives of reducing the risk of gambling-related harm, with a lower risk of

unintended consequences and less disruption to the majority of gamblers who do not suffer harm.'

Although reductions are welcome and the amount which may be lost over time has been reduced slightly, this measure will not protect anyone affected by vulnerability from playing and experiencing harm. The proposals suggest that these stake limits should not be a default but a ceiling; however, it remains to be seen whether that assumption plays out in practice, and whether this in combination with other measures suggested by the White Paper will be sufficient to prevent harms occurring.

### **Gambling Treatment Mapping**

An OHID report assessing the [current gambling treatment system](#) in England was released earlier this month. The report summarises characteristics of the system, what is available and where, what is working well, and where improvement is needed.

It found that services are provided by a passionate workforce, with a variety of treatment options available, and some strong relationships between providers. Despite this, it showed some significant shortcomings which need to be addressed to improve the quality and availability of the treatment offer.

Areas for improvement were defined as:

- Data – as there is currently no standardised approach to data collection and provision across gambling treatment providers
- Pathways – as it is not clear whether people always receive the most appropriate service or treatment for their needs
- Co-ordination – because of conflicts of interest arising from service funding, some providers do not work in an integrated way
- Governance – citing a need for better quality assurance, accountability and standards of training and care
- Awareness – the treatment and support options are not always well publicised, including among other services
- Prevention – some felt more could be done to prevent the need for treatment

### **Words Can Hurt**

A new language guide was launched on 29<sup>th</sup> February – '[Words Can Hurt](#)'. This resource was created by the Greater Manchester Combined Authority, in collaboration with ADPH Yorkshire and the Humber and ADPH North East as part of their work to prevent and reduce gambling harms and work independently from the gambling industry. This guide was created to combat the 'individual responsibility' narrative that is stigmatising for many affected by gambling harms.

This language guide can be used as a tool to double check your language choices on publications, reports, websites and strategies (as examples) to ensure language is not stigmatising and frames harm from a population health approach. This guide may also be useful for those having conversations with individuals experiencing gambling harms, ensuring they are conducted using respectful and sensitive language.

This guide is intended for public health and communication colleagues, but you are welcome to share it further if you feel this would help organisations in your wider

network. You can also find a link to the guide on the [YHPHN website](#). Find out more about the guide launch in our events section.

### **Y&H gambling harms campaign**

The regional campaign '[Gambling Understood](#)' (developed on behalf of Y&H ADPH with Magpie Ltd) finished at the end of January this year, and is now being evaluated. The campaign was aimed mainly at men aged up to 34 years, but with relevance for a wider audience. The second burst of activity was centred around helping people to recognise gambling harm, and to know where to get further help and advice.

Campaign outputs included adverts on Google, YouTube, Snapchat and TikTok, as well as Video on Demand (AdSmart from Sky, C4, ITVX) and out-of-home adverts in a select number of city centre locations. The campaign overall (both bursts) resulted in just under 3m impressions across all platforms, and over 1m video views, reaching not only people who are likely to gamble but others who may be affected.

The evaluation is being conducted by the University of Nottingham; this will look at whether the campaign has influenced perceptions of risk relating to gambling products, and any change in intention to seek help or advice. The final report will be available this summer.

All digital resources are still available for ongoing use by partners and can be downloaded from the [website](#).

### **Gambling events**

Two of the biggest betting events will be coming up in March and April – Cheltenham and Aintree (Grand National) with lots of publicity surrounding them in national press and media which can be difficult to avoid. If you are working with people who may be experiencing gambling harm or are thinking about organising any related events at home or in your workplace, it is worth considering the potential impact these 'socially acceptable' forms of gambling might have on people who could be struggling to avoid incentives to gamble.

As we know, many people do not talk about gambling harm, and can feel too stigmatised to share their fears or concerns. Increasing people's awareness of gambling harm can help everyone be more sensitive to these issues. Greater Manchester will be promoting their 'Odds Are: They Win' campaign during this time; and we would welcome use of the 'Gambling Understood' media to share your own messaging, so we can encourage openness about gambling harm and direct people towards sources of support.

### **Evaluation of Gambling Act review**

A [monitoring and evaluation plan](#) for the UK Gambling Act review will be developed by the National Centre for Social Research (NatCen), a not-for-profit social research organisation. NatCen has been commissioned by DCMS and the Gambling Commission to produce the plan to "establish the evaluation design to address how effective the Gambling Act review has been in preventing gambling-related harm to vulnerable groups and wider communities, gambling behaviours and the gambling market". NatCen's evaluation will consider if the "appropriate balance" has been taken into account between consumer freedoms and prevention of harm to vulnerable groups and wider communities.

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**Taking a whole systems approach to healthy weight**  
**Regional Lead: Nicola Corrigan**

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**Obesity and Mental Health webinar**

Please see a recording [here](#) of the NIHR Ask the Expert obesity and mental health webinar held on Tuesday 5 March 2024

**Food experiences of people seeking asylum in London: areas for local action**

The full report and briefing from Sustain can be downloaded [here](#) and the recording of the webinar can be found [here](#).

**YORA Spring Webinar: Children and Young People's Research and Practice**

This webinar on 24<sup>th</sup> April 2024, is a fantastic opportunity for professionals, researchers, educators, and anyone interested in the wellbeing of our younger generation. This event is part of the Yorkshire Obesity Research Alliance (YORA) webinar series. Register for your place [here](#)

Established in 2020, we are a community of academics, regional and local government policy makers and practitioners, clinicians, key stakeholders and members of the general public with an interest in obesity research within the Yorkshire & Humber area. For more information see the [YORA website](#).

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**Reducing inequalities through action on drugs and alcohol**  
**Regional Lead: Andy Maddison**

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**Free Drug and Alcohol Commissioning Training**

Generis have developed a free online training package aimed at upskilling those new to the role of substance misuse commissioning. This will be ideal for those wishing to provide CDP to those recently recruited to local authority commissioning teams or for those wanting to make the move into a substance misuse commissioning team.

The 70 minute interactive E-Learning package will guide you through the following topics:

- An introduction to Drug and Alcohol Commissioning
- Different types of Contracts
- Policy Framework for commissioning drug treatment
- Drug and Alcohol Treatment

Training can be accessed at a pace to suit you with a wide range of resources for further reading.

Enrol [here](#).

**Update to End of Custody Supervised Licence (ESL) – as from 8<sup>th</sup> March 2024**

The Probation Service has been undertaking specific actions to maximise occupancy in the prison estate due to significant increased population pressures. Over recent weeks they have seen an acute and exceptional demand and have therefore

introduced an additional and temporary measure. As from 8<sup>th</sup> March this has been increased to up to 35 days for men's prisons. It will remain at 18 days in the women's estate.

As previously, more serious and higher risk offenders whose release is a matter for the Parole Board to assess will not be in scope. Those serving a sentence for any kind of sexual offence or who are on the sex offenders' register will also automatically be ruled out as well as those who have committed any violent offence with a sentence of more than four years.

This will not apply in the youth custody estate or long-term high security estate.

Prisoners released under ECSL will be subject to the same set of strict licence conditions and supervision processes as with a standard release. They will be liable to immediate recall to prison if they fail to comply.

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**Promoting physical activity**  
**Regional Lead: Nicola Corrigan**

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**The YSF Weekly**

Get your weekly update from Yorkshire Sport Foundation by registering [here](#)

**Whole Schools Physical Activity Conference June 2024**

The University of Bradford, Wolfson Centre for Applied Health Research & YorkshireSport Foundation are pleased to invite you to our inaugural, International Whole-School Physical Activity Conference taking place in Bradford, UK. Find out more about the agenda and register for your place [here](#)

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**Tackling racism, discrimination and their outcomes**

**Regional Lead: Abi Brown**

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**Black maternal healthcare and community groups: building trust and bridging gaps – Podcast – The King's Fund**

This podcast episode explores how community groups are bridging the gap between health and care services for Black mothers, exploring the challenges Black mothers face in accessing maternity services and what the health and care system can learn in response.

Siva Anandaciva sits down with Amanda Smith (founder and Chief Executive of Maternity Engagement Action CIC), Benash Nazmeen (Professor of Midwifery and co-founder and co-director of the Association of South Asian Midwives CIC) and Chrissy Brown (founder and Chief Executive of the Motivational Mums Club CIC) to hear more about the impactful work they are doing to advocate for change and provide crucial support to Black mothers.

Listen to the episode [here](#).

### **Too Hot to Handle: Why concerns about racism are not heard or acted on – Report, Roger Kline and Brap**

This report by Roger Kline (Research Fellow, Middlesex University Business School) explores why concerns raised about racism in the NHS are not acted on. The report brings together learning from a number of tribunal cases and survey responses from over 1300 NHS staff to explore how healthcare organisations respond to reports of racism.

Please download and read the report [here](#).

### **Perinatal and Infant Mental Health Webinar Recording – Caribbean African Health Network (CAHN)**

This webinar focussed on Black women’s experiences of perinatal and parent-infant mental health, sharing the findings of a report carried out by CAHN. This work was accompanied by information-sharing from individuals on the Greater Manchester’s Integrated Care Boards on perinatal services, and other key insights from key stakeholders in maternal health.

You can watch the recording [here](#).

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## **Creating fair employment and good work for all**

### **Regional Lead: Nicola Corrigan**

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### **New Occupational Health Taskforce to tackle in-work sickness**

The government has launched a taskforce that will produce a voluntary occupational health framework for businesses – which will include setting out minimum levels of occupational health needed to stop sickness-related job losses and help businesses better support those returning to work after a period of ill-health.

Please find out more [here](#).

### **Health and Work Network - Coastal Communities: Turning the Tide Report / Coastal Navigators' Network**

“Turning The Tide: Addressing Health Inequalities in Coastal Towns through the lens of Employment” was published on the Breaking Barriers Innovations [website](#). This builds on the Chief Medical Officer’s [annual report](#) in 2021 on health in coastal communities and work commissioned by Suffolk and North East Essex (SNEE) ICB and NHSE.

The report identifies 4 priority areas for action, which include establishing a coastal navigator's network (CNN) of ICBs to share best practice. The CNN is a new network of 16 ICBs with 51 coastal towns within their footprints facing unique challenges in relation to employment and health.

### **Long-term health conditions: How people professionals can support employees**

[This guide](#) provides information on effectively managing an employee with a long-term health condition or illness. Employers should foster a compassionate culture and empower people to take steps to proactively manage their health.

Everyone has a role to play in helping employees with long-term health conditions look after and get support for their health so they can thrive at work, free from discrimination:

- Employees need to prioritise self-care and self-management to cope with their symptoms and sustain their health and work.
- Work groups and colleagues can provide valuable practical support.
- Managers can help employees access the work adjustments and support that they need to manage their health and work effectively.
- Organisations with compassionate and flexible management policies can help to accommodate individual needs.

### **Mental Health for Employers Toolkit**

[This guide](#) will help employers take positive actions to build a culture that champions good mental health and provides a greater understanding of how to help those who need more support

### **Menopause in the workplace: Guidance for employers**

[These resources](#) are designed to help employers understand their legal obligations in relation to supporting workers experiencing menopausal symptoms.

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**Ensuring a healthy standard of living for all**

**Regional Lead: Toni Williams & Karen Horrocks**

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No updates this month.



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# PRIORITY CONDITIONS AND EQUITABLE SERVICES

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## Promoting public mental health and wellbeing

Regional Lead: Ali Iliff

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### King's Fund: Mental Health 360

Against a backdrop of rising demand for mental health care, the impact of the Covid-19 pandemic and mental health workforce challenges, The King's Fund has taken a deep dive into the state of mental health care services in England. From funding to inequalities, the [report](#) explores nine core areas of the mental health care system.

### Near to real-time suspected suicide surveillance (nRTSSS) for England for the 15 months to November 2023

- The third near to real time suspected suicide surveillance (nRTSSS) for England system is published on 29 February 2024.
- This [surveillance report](#) provides an early warning system for indications of changes in trends in suicides through analysis of data on suspected suicides.
- This data can inform and enable a more timely and targeted prevention response to changing patterns in (suspected) suicides.
- The report provides monthly intelligence on suspected suicide rates overall and split by gender and age, it also provides data that is presented quarterly on suspected suicide method.
- The report is presented as an Official Statistic in Development - this is because some methodological and presentation elements of reporting are being tested and will be improved.

### Key findings

When considering data on deaths by suspected suicide in England for the period September 2022 to November 2023 the following conclusions can be drawn:

- data presented does not indicate an obvious change in trend in **overall suspected suicide rates** over the period.
- for **females**, there is some suggestion that the rate is increasing, but not significantly - this needs to be monitored
- for **25 to 44 year olds**, there is some suggestion that the rate is increasing, but not significantly - this needs to be monitored
- for **45 to 64 year olds**, there is some suggestion that the rate is decreasing, but not significantly - this needs to be monitored

- for **people aged 65 and over**, there is some suggestion that the rate is increasing, but not significantly - this needs to be monitored
- there are indications of higher rates in the summer for **persons, males and 25 to 44 year olds**
- the proportion of deaths for method group **hanging, strangulation and suffocation** is consistently the highest across all quarters, however it shows a continual decrease across the reporting period - this needs to be monitored
- the proportion of deaths for method group **drowning** shows a continual increase across the whole reporting period - this needs to be monitored, as numbers are small

The above findings should take into account that:

- reported monthly rates (other than July and August 2023) are based on **around 65% of England's population**, therefore some caution should be applied when considering these findings - this should be addressed in future reporting
- monthly rates for July and August 2023 include **all areas** of England viewed as **likely to have low suspected suicide rates**, but **not all likely to have medium or high rates**, therefore figures for these months may **skew towards lower** rates
- a large number of historical records were added recently that improves reporting, however some were **missing 'sex', 'age' or 'method type'** which has impacted on the monthly DSR breakdown reporting and increased the proportion of 'method type' that is presented as 'other or unknown'

## **Annex A: Additional Context**

- The data outputs from the nRTSSS work programme are primarily for national and local organisations working on suicide prevention.
- This data will help national and local policy makers to get earlier data on suicide rates by gender, age and method to inform suicide prevention activities.
- ONS provide national suicide data, this is based on date of death registration rather than date of death, and is subject to delays due to the Coroner's inquest process – this new data set complements that data set.
- This data set provides evidence on changing trends in suspected suicide at the England level, it provides new intelligence that compliments and supports the more detailed case by case work undertaken in local areas.
- The data has been collected from Police Forces in England via a data sharing agreement with the National Police Chiefs Council (NPCC). Without

collaboration of the NPCC and local police forces this work would not have been possible.

- There is a data quality and completeness process in place to ensure data used is representative of the area covered, this means not all data collected from the police is used in the monthly presentation – the most recent months are based on approximately 62% of England’s population aged 10 years and over.
- These are early steps in developing this surveillance system. Next steps will be undertaken with local systems, police forces and academics to improve the coverage and timeliness of data collection, and to present on more aspects (ethnicity, occupation, contact with mental health services) of death by suspected suicide.

### **The Mental Health of Asylum Seekers and Refugees in the UK**

The [report](#) from the Mental Health Foundation presents evidence on the economic, social and cultural circumstances which asylum seekers and refugees who seek sanctuary in the UK can face, and how these circumstances affect their mental health.

Key messages:

- *Exposure to violence and trauma increases migrants’ risk of posttraumatic stress disorder (PTSD), they are more likely to experience depression, and anxiety disorders, and are a high-risk group for suicidal ideation. Internationally, around 30% of refugees and asylum seekers have been found to experience PTSD, with the figure for those experiencing depression also around 30%.*
- *The social and economic conditions in which they live post-migration can have an equally powerful influence on their mental health. Experiences of poverty, financial insecurity, unemployment, lack of adequate housing, social isolation, loneliness, prejudice, stigma, and discrimination all carry a higher risk of poor mental health, and asylum seekers and refugees are at higher risk of experiencing all these inequalities.*
- *Asylum seekers will also often be dealing with stress about the status of their claim and challenges in accessing healthcare.*
- *The UK government, devolved administrations, and local authorities have the power – and the responsibility – to address these social determinants of poor mental health, both directly and through supporting the third sector.*
- *This report sets out how they can work together to create a society that respects the dignity of asylum seekers and refugees and provide the building blocks that underpin good mental health.*

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### **Improving sexual and reproductive health**

**Regional Lead: Georgina Wilkinson**

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### **UKHSA Blog: STIs through the centuries**

In England, [data produced by the UKHSA](#) shows that year after year new diagnoses of sexually transmitted infections (STIs) remain high and, between 2021 and 2022, diagnoses of gonorrhoea and infectious syphilis increased by 50% and 15% respectively. This [blog](#) explores the rising tide of STIs across the eons, how ancient

Greeks feared the killer “scorpions and serpents” in semen, and how goat's milk was thought to be a curative for sexual ailments.

### **International Women’s Day - Further HIV progress needed among heterosexual women**

Professor Susan Hopkins, UKHSA Chief Medical Adviser, [warns that more awareness is needed to encourage women to take up HIV testing](#) amid slow progress in tackling transmission.

Despite a significant fall in cases among gay and bisexual men between 2019 and 2022, heterosexual groups are not following the same trajectory. Since 2021, progress has slowed in reducing HIV transmission among heterosexual women, with cases rising by 26% from 447 to 564 in 2022.

The UKHSA’s latest survey into those living with the virus, [Positive Voices](#), also revealed concerns specific to women, with higher levels of stigma compared to some other groups. The survey found it was more common for women (14.1% compared to 8.8% in men) not to share their HIV status with anyone.

UKHSA is calling on everyone, no matter your gender or sexual orientation, to use condoms, get tested, and take PrEP if you’re eligible, to protect you and your partners’ health.

### **Roadmap for meeting the PrEP needs of those at significant risk of HIV**

DHSC have published this [report](#) from the [HIV Action Plan Implementation Steering Group](#) (ISG). This PrEP roadmap is part of the group’s work to drive forward the implementation of the [HIV Action Plan](#). This includes a commitment to support the system to continue to improve access, uptake and use of HIV PrEP for key population groups, including in settings outside specialist sexual health services.

Actions in the roadmap will be implemented in collaboration with key delivery partners across the public health system and, throughout its implementation, the ISG will work closely with stakeholders to amend key priority areas as knowledge, resources and opportunities to take effective action evolve.

The roadmap will help guide the ISG’s efforts to improve equitable access, uptake and use of PrEP, reflecting evolving priorities, funding availability and policy changes to ensure we achieve our ambitions in the most efficient way possible.

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**Improving health and reducing inequalities through health and care services**

**Regional Lead: Toni Williams**

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No updates this month.

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# WORKFORCE DEVELOPMENT TO TACKLE HEALTH INEQUALITIES

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**Regional Lead: Chris Sharp**

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## **Introduction to Fingertips – more dates now available**

The Introduction to Fingertips webinars are aimed at beginners who would like to build their confidence using the [Fingertips public health profiles](#). Fingertips is a large public health data collection; it presents a wide range of data indicators for different geographies, allowing comparisons between areas and against chosen benchmarks. Fingertips helps to highlight issues that can affect health in a selected geography and can be used to effectively target activity to improve the health of your local population and reduce health inequalities.

The session will take place on MS Teams and will include:

- An introduction to Fingertips – what it is and where to find it.
- A demo of the tool – how to navigate around, plus tips and tricks for finding what you need.
- Interactive exercises to give you hands on experience with the tool.

There will also be opportunities to ask questions. To attend the session, register via Ticket Tailor and an MS Teams link will be sent via the confirmation email. Places are limited and will be allocated on a first come, first served basis. Sessions are being held on:

- Thursday 14<sup>th</sup> March, 1.30 – 3.00pm.  
(Find out more and register your place [here](#))
- Tuesday 9<sup>th</sup> April, 11.00am – 12.30pm  
(Find out more and register your place [here](#))

If sessions are fully booked, you can join the waiting list to be informed when places become available. You can also check our [events page](#) for further dates as they become available. We are currently running these sessions on a monthly basis.

We are committed to running inclusive events. If you have any accessibility requirements, please get in touch with us at [publichealthinfocus@dhsc.gov.uk](mailto:publichealthinfocus@dhsc.gov.uk).

## **Leadership Webinars – Franklin Covey**

The North East and Yorkshire Leadership Academy are excited to announce a series of FranklinCovey webinars running from March to May 2024.

Franklin Covey helps organisations to achieve results that require lasting changes in human behaviour. The topics in this webinar series focus on some of the biggest leadership challenges facing senior and executive leaders. The content of each webinar is based on timeless principles of human effectiveness and is designed to help people change both their mindset and their behaviour.

The webinar series is designed to be flexible – attend one or attend all, dependent on the specific individual and organisational challenges you currently face.

### *Booking process*

Each workshop in this webinar series has its own registration link. Once registered, please hold the dates and times of your requested masterclass in your diary as diary invites and joining instructions will only be sent the day after registration closes. While attendance for each masterclass is not compulsory, please advise us if you are no longer able to commit to your registered workshop/s so we can offer the place to others.

- Please [click here](#) to register  
(Registration closes Tuesday 26th March)
- Please [click here](#) to register  
(Registration closes on Wednesday 17th April)
- Please [click here](#) to register  
(Registration closes on Thursday 18th April)
- Please [click here](#) to register  
(Registration closes on Wednesday 1st May)
- Please [click here](#) to register  
(Registration closes on Wednesday 8th May)

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## ANY OTHER RELEVANT PUBLICATIONS

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The Y&H ADPH and Public Health Network have published a **consensus statement on the commercial determinants of health** rooted in available evidence. It details why these determinants matter to our health and society and outlines harmful commercial practices such as influencing and hindering policy-making, and massive marketing campaigns promoting unhealthy products. Next, it sets out the public health approach to counter such commercial tactics where they are harmful to health through shared key principles and initial actions.

You can view the consensus statement, and other resources on commercial determinants of health, on the Healthier Fairer Futures [resources webpage](#).

### **Inclusive Wellbeing Economies**

#### **This must be the place – Centre for Local Economic Strategies (CLES) – Report**

In this report, CLES draw upon insights gathered from local councils and other anchor partners from across the UK where, despite the challenges, local leaders are taking steps to build wealth. A number of recommendations are also made, including for national leaders outlining what government should do to empower local government to deliver change at a greater scale and pace.

Read more [here](#).

#### **Inclusive Wellbeing Economies CPD-3 Place Based Community Wealth Building – Online Webinar**

Local government faces a tough task when it comes to managing and growing our local economies. Many councils are on the brink of insolvency, and local government is hindered by insufficient funding arrangements that affect its ability and capacity to plan for the long term.

Nevertheless, some areas are fighting against the tide and from CLES's work, This must be the place they are building on the case for local action through the perspective of community wealth building: where the wealth that exists, and is generated, goes to the people and communities who need it the most, rather than leaking out to those who can take care of themselves.

In this online webinar, CLES's, Sarah Longlands Chief Executive and Tom Lloyd Goodwin Director of Policy and Practice will take us through their recent work in This must be the place

You can register for the event [here](#).