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OND Health Inequalities Project: Brief Summary of Key Findings

Biggest Challenges

1) Poor transport infrastructure

This was the most common response to the question about challenges in the survey and was also frequently mentioned in conversations with organisation staff, as well as community members. Transport links are one of the key geographic factors influencing health inequalities and a lack of access to them can have a whole range of impacts on individuals. Participants in the study revealed that limited and infrequent public transport meant they struggled to access healthcare appointments, pharmacies, employment and also social activities.

Poor transport infrastructure was a particular challenge for young people who were not old enough or could not afford to run a car and subsequently had to rely on friends and/or family members to get out and about. This lack of ability to access things sometimes resulted in feelings of loneliness and exclusion.

2) Lack of affordable housing

Housing is a key social factor which influences health inequalities. It is perhaps not surprising that this emerged as a key challenge in this research, as Torridge and North Devon are in the most deprived areas for barriers to housing in the whole of Devon. Participants shared how there was very limited access to affordable housing – both for renting and buying. This was largely due to the high number of second homes (and increase in Airbnbs) in many areas.

According to the Health Foundation (2022), housing influences health in four key ways:

- Affordable and offers a stable and secure base
- Able to provide for all the household's needs
- A place where residents feel safe and comfortable
- Connected to community, work and services (https://www.health.org.uk/infographic/how-does-housing-influence-our-health)

3) Poverty

Child poverty and fuel poverty have already been identified as key issues in One Northern Devon's 10 Year Strategy and it is likely that the situation will continue to worsen due to the current living crisis. Research shows that all areas of a child's life can be adversely affected by poverty, including their home life, education and friendships. It can prevent them from enjoying their childhoods and achieving their aspirations. In terms of health impacts, it can dramatically decrease life expectancy and increase the risk of illness and mental health problems (Child Poverty Action Group: https://cpag.org.uk/child-poverty/effects-poverty)

Some of the organisations in Northern Devon aim to highlight the link between poverty and poor health. Some of their employees felt that the impact of child poverty is becoming *'more serious by the day'* so they are taking a preventative approach in their work and trying to help people before they get into debt. Additionally, as energy prices rise, more people are living in fuel poverty, meaning they are struggling to heat their homes and afford basic necessities including food. Cold homes impacts health in a number of ways, including increasing the risk of respiratory, cardiovascular and circulatory disease, accidental injury and poor mental health (The End Fuel Poverty Coalition: https://www.endfuelpoverty.org.uk/about-fuel-poverty/). Survey participants shared how some of the individuals they worked with were living in fuel poverty and low-income households were struggling to pay their fuel debts.

Participants from farming communities, in particular, shared how they were living in financial hardship and struggling to access new payment schemes for farmers. Some families were struggling to afford school uniform for their children. This then had a knock-on effect on their mental health as they were anxious about their financial situation.

4) Geographical remoteness and rurality

This issue links back to the lack of transport infrastructure and the challenges that individuals living in rural areas face trying to access healthcare, employment and other services. Again, this impacted mental health as individuals experienced exclusion and social isolation. The remoteness of rural areas was exacerbated by poor internet connectivity, particularly during bad weather. Subsequently, young people struggled to keep in contact with their friends online as frequently as they wished to and working from home was also challenging for those whose employment required them to do so.

Other challenges highlighted by organisations and community members were:

• Social isolation and loneliness

• Low wage economy

5) Access to GP and lack of/access to primary healthcare services

These issues were consistently raised by survey participants and during conversations with the community members. Research has shown that there are significantly fewer GPs per head in the most deprived areas and that one in seven people in the more deprived areas were unable to get a GP appointment compared to one in ten in the least deprived. Many individuals struggled to speak to their GP and some even had issues accessing one in the first place. Some participants struggled with the shift to virtual appointments since the Covid-19 Pandemic and said they would prefer to see their GP in-person.

Other individuals living with chronic illness shared how they struggled to access both specialised healthcare for their conditions, as well as more routine support:

'*There are not enough specialists, GPs, dentists or mental health support.*' (South Molton)

'*There are long waits for services, even for blood tests.*' (South Molton)

This meant that seeking the correct support for their illnesses became a '*struggle*' or a '*constant challenge*' which added to the challenge of living with a chronic illness.

Similarly, access to dentists was highlighted by community members as a key challenge.

6) Mental health

Community members and organisations raised mental health as a one of the biggest challenges they were facing. Often this was due to anxiety around money. These findings highlight that challenging factors are interrelated – they can occur together and compound over time, with one factor exacerbating another.

Commented [GK1]: Nuffield Trust (2018) Poor areas left behind on standards of GP care, research reveals. https://www.nuffieldtrust.org.uk/news-item/poor-areas-left-behind-on-standards-of-gp-care-research-reveals

Overcoming Biggest Challenges

People working for organisations in North Devon and Torridge think that these challenges can be overcome by:

• **Improvements to public transport links and provision of more affordable transport**

This would enable individuals to better access services, healthcare and employment. It would also help those living in remote areas to feel less isolated and better connected. Participants suggested improvements to rail links, roads and bus services as well as increased funding for community transport groups:

'Totally rethink the rail links to speed up access to Exeter, Bristol and London from Barnstaple. Increase the link road to dual carriageway all the way to the M5 from Barnstaple.' (Organisation survey respondent)

'Transport is an ongoing issue but there are some organisations who could receive further funding such as Go North Devon, volunteer bureau etc.' (Organisation survey respondent)

'Better public bus services or support/funding of community transport groups [is needed].' (Organisation survey respondent)

• **More investment in public services**

Those working for organisations repeatedly emphasised the struggles they experienced in accessing funding and how this affected the continuity of some of their programmes when funding streams came to an end. Some staff members also spent a great deal of time securing funding rather than actually delivering services:

'We need to ensure sustainable long-term financial security of services working to overcome inequalities.' (Organisation survey respondent)

Other participants shared how many groups had come to rely on voluntary services, however more funding was required to support them:

'Increase support in voluntary services.' (Organisation survey respondent)

Some organisations had experienced a drop in volunteer numbers since the Covid-19 Pandemic as older individuals were still nervous about going out and about. Attempts to encourage younger people to volunteer were proving challenging as they were focused on making money in response to the cost-of-living crisis.

• More investment in affordable housing

'*Incentivise ideas for low cost, good quality affordable housing. The council should be able to buy empty buildings to renovate as affordable housing*.' (Organisation survey respondent)

'*People need to be able to put down roots to feel secure, build a community and feel less isolated. Needs real affordable housing, high taxes on second homes, limitations on Air B&B and holiday lets and investment in our area for community resources*.' (Organisation survey respondent)

As the latter quotation illustrates, access to housing provides a stable and secure base and somewhere residents can feel safe and comfortable. It can also help them to be better connected to community, work and services.

• Improvement in outreach into communities e.g., through groups, befriending services, intergenerational connections and listening to people

Organisation members suggested several ways improved outreach could be achieved. Some individuals felt that a 'community champions' model would work well and would be more sustainable in the long-term:

'*Community champions who support community developers/One communities with outreach work, similar to volunteer support workers, buddying up with people to increase confidence and socialisation.'* (Organisation survey respondent)

'Developing volunteer bank/community champion idea and not being reliant on funding to fix social/health inequalities, as short term funded projects don't provide sustainability. Whereas, community champions similar to Frome/Mendip model works well and they evidence this too.' (Organisation survey respondent)

Several participants also stressed that organisations need to *listen* to community members and work *with* them to develop solutions rather than imposing things on them. It was felt that a more bottom-up approach that takes individuals' lived experiences into account would be the most beneficial:

'Listening to the community members and those who advocate for them. Collaborating with community members to develop solutions together through lived experience.' (Organisation survey respondent)

'To go out into the community to talk to service users on their personal experiences to gain this first hand.' (Organisation survey respondent)

• Taking a creative and innovative approach

A key theme that ran through the narratives of organisation members was the need for creative and innovative approaches. There was a feeling that more traditional approaches were failing and therefore something different was required:

'*We need to engage people in thinking creatively about how we can increase wages and opportunities for people for employment.'* (Organisation survey respondent)

'Work with local churches to support, mentor and create creative solutions around local issues.' (Organisation survey respondent)

Community members in North Devon and Torridge think that key challenges can be overcome by:

• Restrict/apply levies on second home ownership for tourists/short term lets
• Build more affordable housing and build more social housing
• Better pay for carers
• More mental health support

When community members were asked:

'*If you have experienced challenges or difficulties in the past, what helped you to overcome them?'*

The most common response was 'family and friends' followed by 'faith/church support' and 'perseverance/resilience.' The latter response echoes the 'you just have to get on with it' mentality

that several community members expressed in conversations with them. The fact that individuals largely rely on friends and family for support suggests that much more can be done by way of service provision to help individuals who are experiencing difficulties. The responses also highlight the important role that faith groups play in supporting individuals and therefore future approaches should take this into consideration and ensure that links are made between such groups and service providers.

Main Priorities for OND

Organisations' views:

• Improving public transport

• Improving support services

o e.g., mental health, loneliness, isolation, families, dementia

• Helping organisations to collaborate

• Creating a hub/portal where services can be accessed

• Finding out what people's needs are by going out into communities/ Listening to people

• Empowering people

o e.g., Local Community Champions

• Ensuring sustainable long term financial security of services

• More family support, from prenatal through to teenagers

Community members' views:

• Affordable housing – help with housing – sort out housing – social housing

• Financial advice and support

• An individual/personal approach

• Listen to locals

• Better health care provision/facilities

• Focus on mental health – more mental health support

Other support needed:

• More publicity on available services in a range of different formats across all age groups

• More support from local Council

• Listen to the community

Barriers to Collaborative Working

People working for organisations in North Devon and Torridge consider that the barriers to organisations working together to overcome inequalities in Northern Devon are:

• Lack of funding
• Organisations not always sharing information with each other / working in silos
• Competition for funding within the sector
• Lack of knowledge and understanding of needs
• Time-limited nature of funding
• Lack of capacity

A lack of funding means that often, organisations were so focused on delivering their services they did not have the time or capacity to network or explore avenues of collaboration with other organisations. Related to this, some participants spoke about funding being ringfenced to particular services:

'*Funding tends to be ringfenced to particular areas of work. Organisations are stretched providing their own services and often don't have the capacity to explore other angles of work.*' (Organisation survey respondent)

'*Practitioners don't always have the time for networking.*' (Organisation survey respondent)

'*Finding the time that suits all to meet is a major barrier.*' (Organisation survey respondent)

Additionally, many participants mentioned a culture of silo working as a key barrier to collaboration. Sometimes this was due to limited time and/or funding, and in some cases, participants felt it was due to politics and competition between organisations:

'*Politics and certain organisations' reluctance to partnership working/collaboration or being very fixed in their priorities with little flexibility.*' (Organisation survey respondent)

'*Organisations do not always work together or share information on the services they are providing. Think the 'Ones' help to break down these barriers but it is only as effective as the people/organisations who are happy to participate.*' (Organisation survey respondent)

'*Agendas may conflict, culture of silo working, fear, lack of understanding, competition, misalignment in terms of values/ethics/ethos.*' (Organisation survey respondent)

'*Left hand not knowing what the right hand is doing. Silo and time limited funding*.' (Organisation survey respondent)

'*Working in silos and having in flexible remits as this prevents collaborative working*.' (Organisation survey respondent)

Organisational Engagement

People working for organisations in North Devon and Torridge who filled in the project survey would like to engage with other organisations working with communities across Northern Devon through:

• Face-to-face meetings
• Networking
• Online meetings
• Forum
• Identifying common goals
• Knowing who represents which service
• Collaborative working
• Continue with One communities network meetings
• Regular focus/working groups
• Surveys
• Newsletters

Evidently, participants were keen to engage with other organisations in diverse ways. Face-to-face meetings were often viewed as preferable as participants felt they would allow organisation members to better get to know each other and encourage more team working:

'*Spend time with them, get to know them and their teams, become viewed as part of the furniture in their team as well as them feeling they are genuinely part of our team and the OND team. Working alongside each other can help to reduce hierarchy.*'

Many participants observed that face-to-face meetings were not always practical and felt that online meetings were also sufficient.

Some organisations were keen for shared workspaces or drop-in hubs:

'*We want to have a permanent base in Barnstaple, incorporating a drop-in hub. We would be happy to promote the work of other organisations through this, including guest slots for organisations to promote their work to our community. We are working hard currently to make this a reality. From our base we would commit to outreach work in the other communities in North Devon.*' (Organisation survey respondent)

'*Shared workspaces within each other buildings seen as being normal or a building where all agencies work out of and frequent.*' (Organisation survey respondent)

Some participants also thought the One Communities initiatives were working well and were hopeful they would be developed further in the future.