

# Maximizing opportunities for health and wellbeing for people and communities experiencing socio-economic disadvantage in Wales

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Lewis Brace

8<sup>th</sup> June 2023

# Socio-economic Duty toolkit & animation



# What is the Socio-economic Duty?

The overall aim of the Socio-economic Duty is to support public sector bodies in Wales to make better decisions that will improve outcomes for people and communities who experience socio-economic disadvantage.

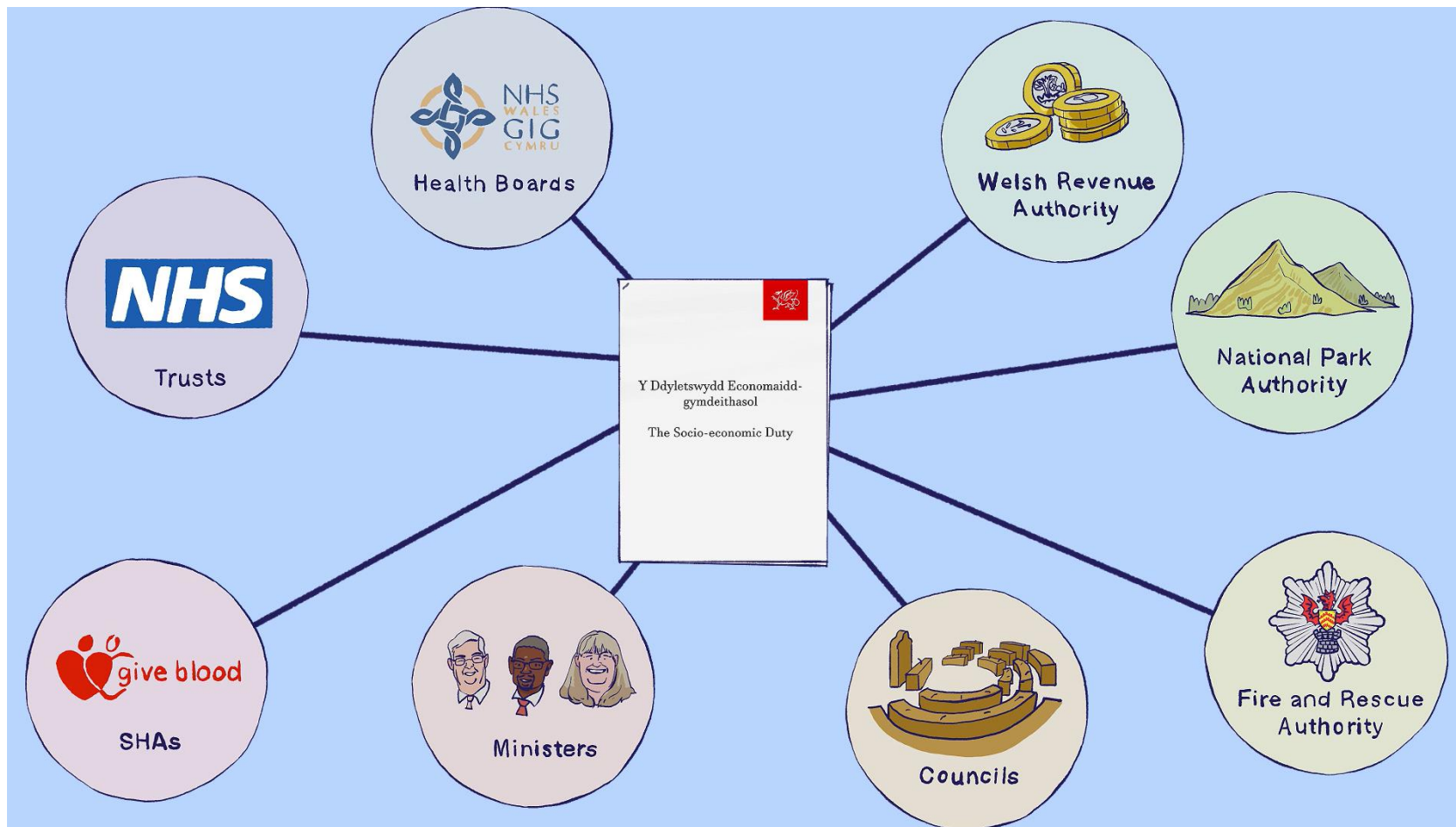
Places a legal responsibility on particular **public bodies** when they are taking **strategic decisions** to have **due regard** to the need to reduce the **inequalities of outcome** resulting from **socio-economic disadvantage**.



The Socio-economic Duty is an **opportunity** to make a difference to the health and wellbeing of those experiencing socioeconomic disadvantage and promote equality.

# Terminology

Places a legal responsibility on particular **public bodies** when they are taking **strategic decisions** to have **due regard** to the need to reduce the **inequalities of outcome** resulting from **socio-economic disadvantage**.



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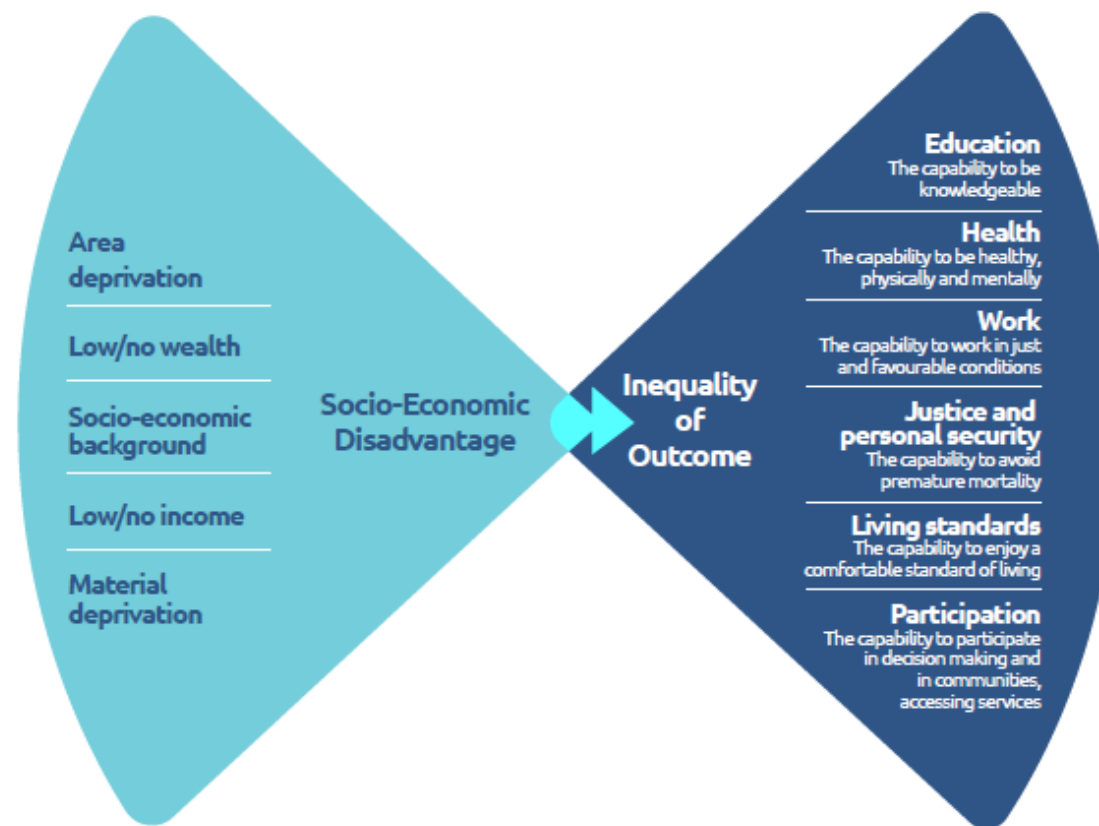




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(Source: A More Equal Wales, 2021)<sup>1</sup>



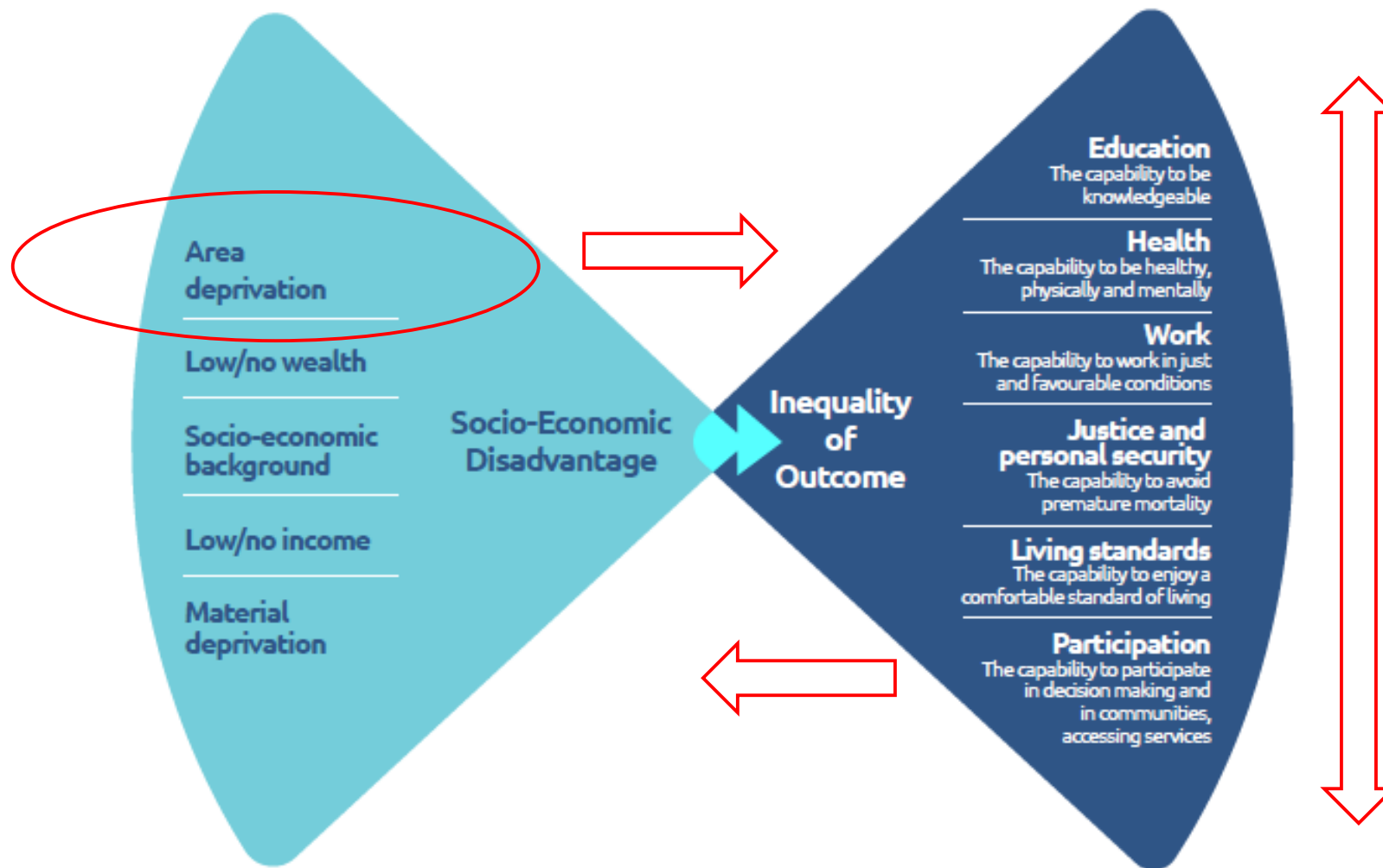
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(Source: A More Equal Wales, 2021)<sup>1</sup>



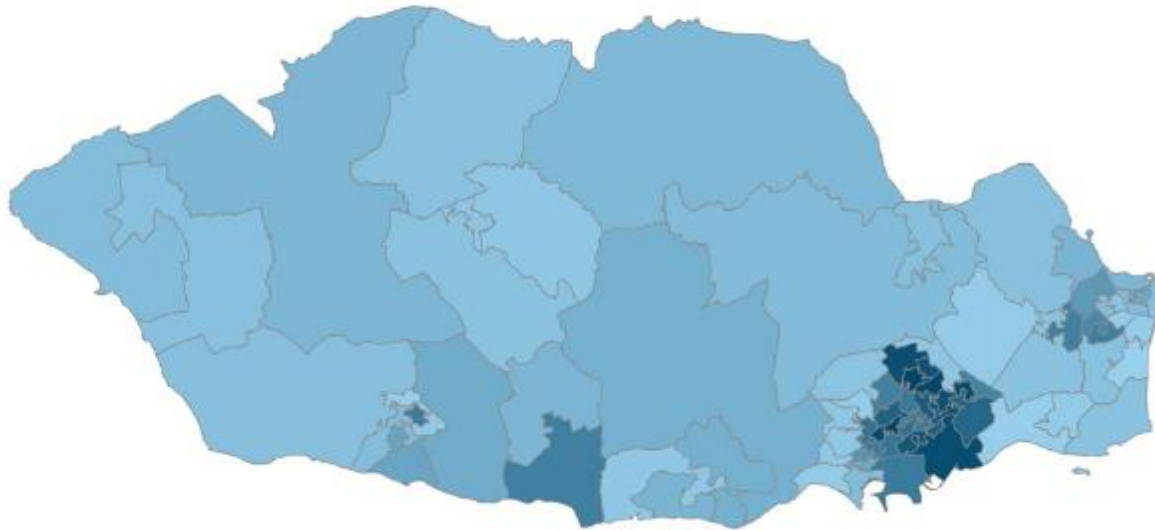
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# Area deprivation

WIMD 2019 Overall Ranks in the Vale of Glamorgan



The most deprived LSOAs in the Vale of Glamorgan are highlighted in the darker shading (Source: Vale of Glamorgan Public Services Board, 2019)<sup>9</sup>

Monmouthshire



Blaenau Gwent

13 minute journey

13 year gap in healthy life expectancy (males)

Public Health Wales. Health expectancies in Wales with inequality gap. Published 2022.

## Socio-economic disadvantage



### Community of place

Shared geographical locations, for example where people work or live.



### Community of interest

A shared identity, for example lone parents or care leavers.



### Intersectionality

The way in which characteristics such as gender, race or class can interact and produce unique and often multiple experiences and disadvantage



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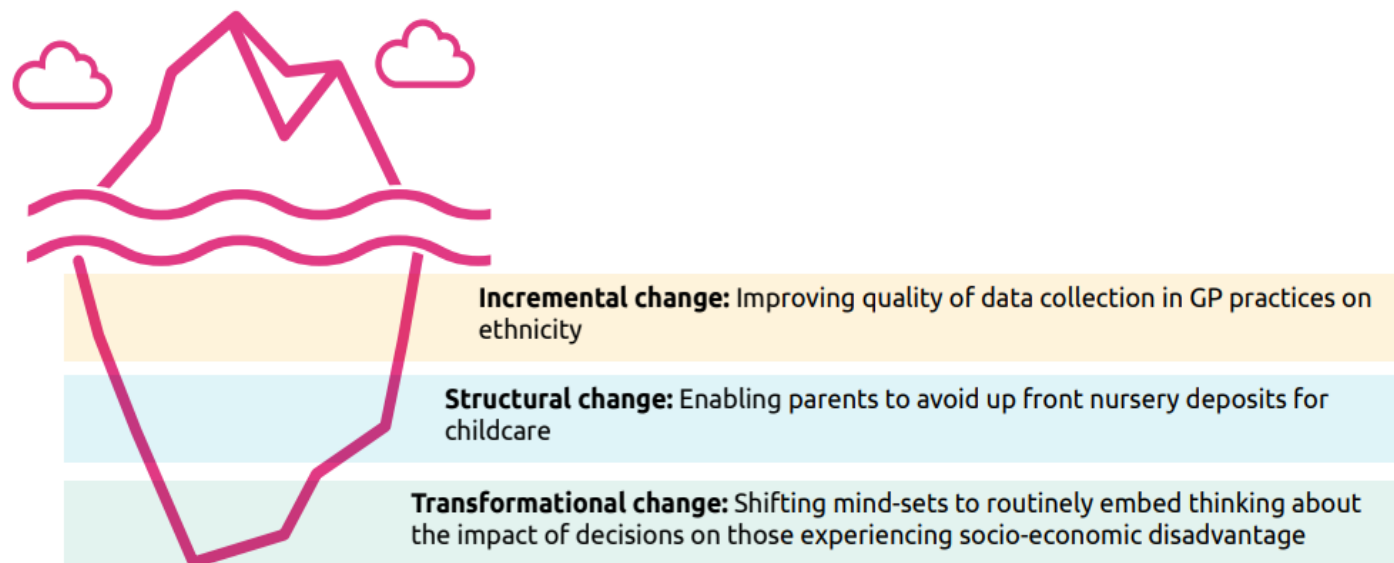
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# System leadership

*“The Socio-economic Duty provides an opportunity for organisations to change the way they think, act and deliver services to the most deprived groups.”*



# System leadership

## Check-list of questions to enable internal system change

- Is there an understanding and awareness from Board level to delivery teams in your organisation of what the Socio-economic Duty is and what is needed to meet the duty?
- Do you have a process to ensure strategies are reviewed in light of the Socio-economic Duty?
- Do you have an integrated impact assessment process?
- Is the impact of strategies on lower socio-economic groups and other inequalities in health highlighted on Board paper templates?
- Do you have an authentic process to ensure co-production and the voices of people who are affected by deprivation are heard?
- Can you be assured that the Socio-economic Duty is not just a tick box exercise but genuinely being used to embed improving health inequalities in the work your organisation does?
- Do you have champions for the Socio-economic Duty across your organisation including at Board level?

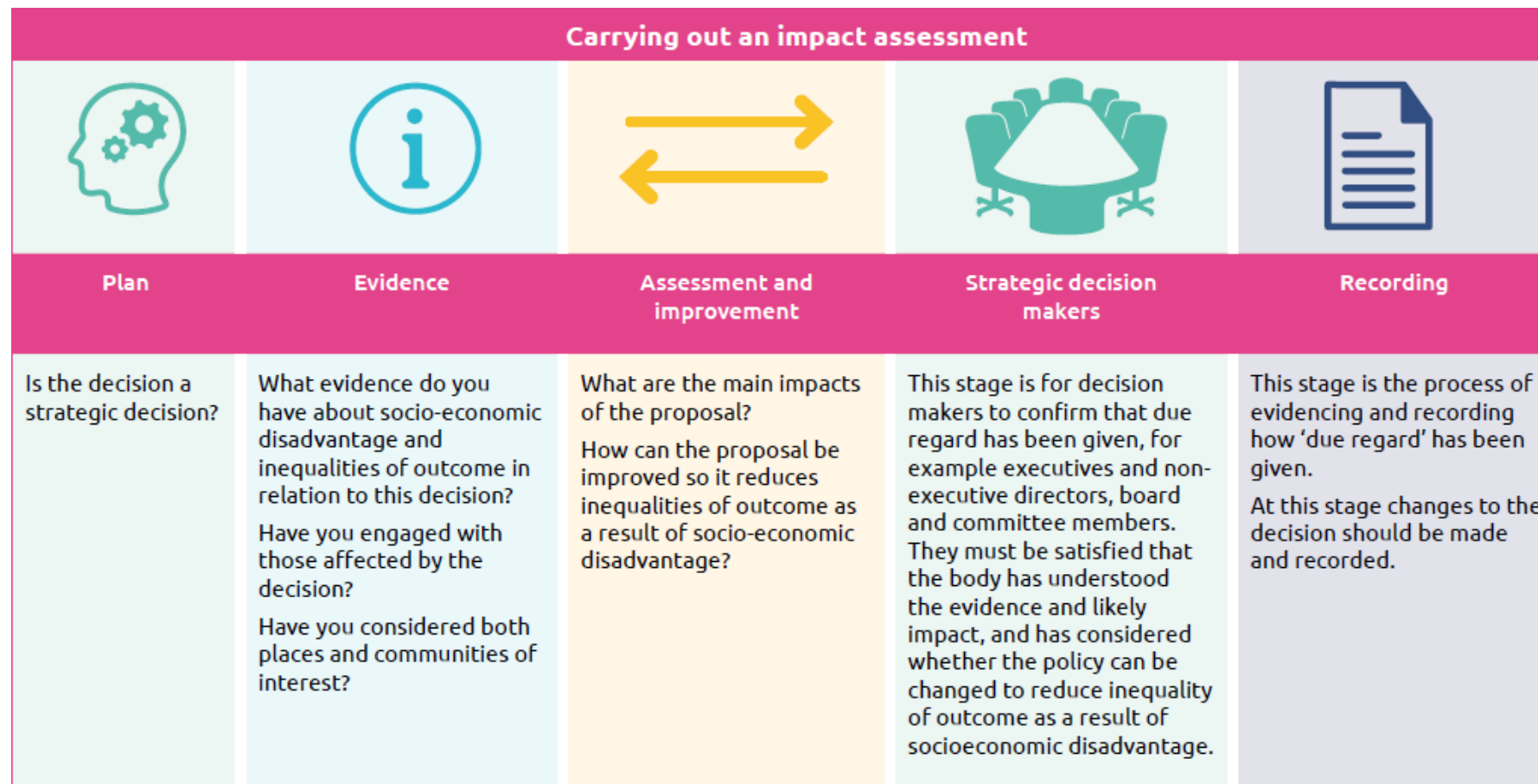
# System leadership

## Questions to consider for System Wide Change<sup>54</sup>:

- How do we orient our efforts more purposefully from small experiments and single point solutions and quick fixes to system transformation?
- How do we share and link data more effectively between organisations?
- Are you involving and co-producing change with those who are experiencing healthcare inequalities through engaging communities in design, implementation and evaluation?
- How do we create robust mechanisms for *collective* learning and reflection?



# Implementing the Duty in practice



Source: Adapted from A More Equal Wales<sup>1</sup>



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# Implementing the Duty in practice

- What are the potential impacts of the proposal/decision as we currently understand them?
- Are there any unintended consequences of the proposal/decision on people experiencing poverty and at the sharp end of inequality?
- How could the proposal/decision be improved so it reduces or further reduces inequalities of outcome, with a particular focus on socio-economic disadvantage?
- How will this policy or service assist us to reduce inequality in outcomes overall?
- How can we ensure the views and experiences of people in poverty and at the sharp end of inequality inform decisions and service design?
- How will actions and outcomes be monitored?
- [If planning to adjust a proposal/decision], can we adjust our decision further to benefit particular communities of interest or of place who are more at risk of socio-economic disadvantage?

# Using data effectively

Quantitative data sources available to public bodies in Wales and how they may be used in measuring socio-economic disadvantage and inequality of outcome.

| Data source <sup>1</sup>            | Frequency                           | Description  | Area level <sup>2</sup> | Measure of Socio-economic disadvantage |        |                           |        |                      | Measure of Inequalities of Outcome |      |                 |        |                               |               |
|-------------------------------------|-------------------------------------|--------------|-------------------------|--|--------|---------------------------|--------|----------------------|------------------------------------|------|-----------------|--------|-------------------------------|---------------|
|                                     |                                     |              |                         | Area deprivation                       | Wealth | Socio-economic background | Income | Material deprivation | Education                          | Work | Living standard | Health | Justice and personal security | Participation |
| Census                              | 2021 (every 10 years)               | <sup>3</sup> | OAs, LSOAs, MSOAs       | ✓                                      | ✗      | ✓                         | ✗      | ✗                    | ✓                                  | ✓    | ✗               | ✓      | ✗                             | ✗             |
| Welsh Index of Multiple Deprivation | 2019 (every 4-5 years) <sup>4</sup> | <sup>5</sup> | LSOAs                   | ✓                                      | ✗      | ✓                         | ✓      | ✗                    | ✓                                  | ✓    | ✓               | ✓      | ✓                             | ✓             |
| Public Health Outcomes Framework    | 2022 <sup>6</sup>                   | <sup>7</sup> | LSOAs, MSOAs, USOAs     | ✓                                      | ✗      | ✓                         | ✓      | ✓                    | ✓                                  | ✓    | ✓               | ✓      | ✓                             | ✓             |

# Using data effectively

## Summary Points

- 1,072 participants took part in the January 2023 survey (9 – 30 January).

### Mental Well-being

- **75%** of people strongly agreed\* that it is important people take action to protect and improve their mental well-being.
- **33%** said they currently take 'a lot' of action to protect and improve their mental well-being; 12% said they take no action.
- **40%** strongly agreed\* that they know what actions they can take to protect and improve their mental well-being.

\*Ratings of 9 and 10  
on scales of 0 to 10

### Health Inequalities

- **31%** of people strongly agreed that the circumstances children are born into determine their opportunities for good health throughout life.
- Participants were asked how much of a problem they thought various forms of health inequalities were in Wales. Those most commonly rated as a 'huge' problem were:
  - Inequalities in income and wealth (**47%**)
  - Inequalities between more and less deprived areas (**45%**)
  - Inequalities in education outcomes for children (**36%**)

### Vaccines

- **67%** of people think it is very important\* that people get a vaccine when offered.
- **29%** of people looked for information to help them decide whether to accept the last vaccine they were offered.






### Risk-taking Behaviour

- **16%** of people said they currently smoke tobacco.

Jan 2023

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# Meaningful engagement

| Different ways of engaging  |   |   |  |   |
|---|---|---|--|---|
|  |              |    |                           |    |
| Inform  | Consult   | Engage  | Collaborate  | Co-production   |
| Sharing information, for example through e-mails, flyers and social media         | Engaging with communities will lead to services that are better designed to meet their needs. | Speaking and listening to people and communities to understand the issues, for example through patient forums, citizen panels or focus groups | Working with people and communities to include their ideas, for example through iterative co-design sessions | An equal partnership from start to finish, using a combination of tools such as asset mapping, community conversations and co-design sessions |

**Involving people from the outset**

Representative users, not simply user representation

**Committing to the process**

Including time and resources

**Triangulating data**

Exploring how diverse forms of evidence can inform policy and service design

**Analysing and acting on feedback**

Closing the loop by communicating back to those that were engaged






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# How do we know if we have made a difference?

| Type of evaluation questions  |   |   |
|---|---|---|
|    |    |   |
| Process   | Impact  | Outcome   |
| <ul style="list-style-type: none"><li>On what decision-making processes have impact assessments been conducted?</li><li>What engagement activity took place?</li><li>What data was used?</li><li>What were the barriers to conducting an impact assessment?</li></ul> | <ul style="list-style-type: none"><li>Did the impact assessment change the direction of the decision making?</li><li>How did the impact assessment change the direction of the decision making?</li></ul> | <ul style="list-style-type: none"><li>Did the implementation of the policy or service have a positive impact on the outcomes for people and communities who suffer socio-economic disadvantage?</li><li>Did the implementation of the policy or service have any unintended outcomes (positive or negative) on people or communities that suffer socio-economic disadvantage?</li></ul> |

FORM

## Socio-economic Duty: progress tracker tool

This progress tracker will support public bodies in meeting the requirements of the Duty. It will help achieve change in the way important decisions are made.

Part of: [The Socio-economic Duty: guidance and resources for public bodies and Equality planning and strategy](#)

First published: 4 August 2021

Last updated: 4 August 2021

## Documents



### Socio-economic Duty: progress tracker tool

DOCX 45 KB

This file may not be accessible. [Request a different format.](#)

<https://www.gov.wales/socio-economic-duty-progress-tracker-tool>

# Together with hope: Health equity and the social determinants in Gwent

**‘To be truly radical is to make hope possible  
rather than despair convincing.’**

- Raymond Williams

## What is a 'Marmot region' & why has Gwent become one?

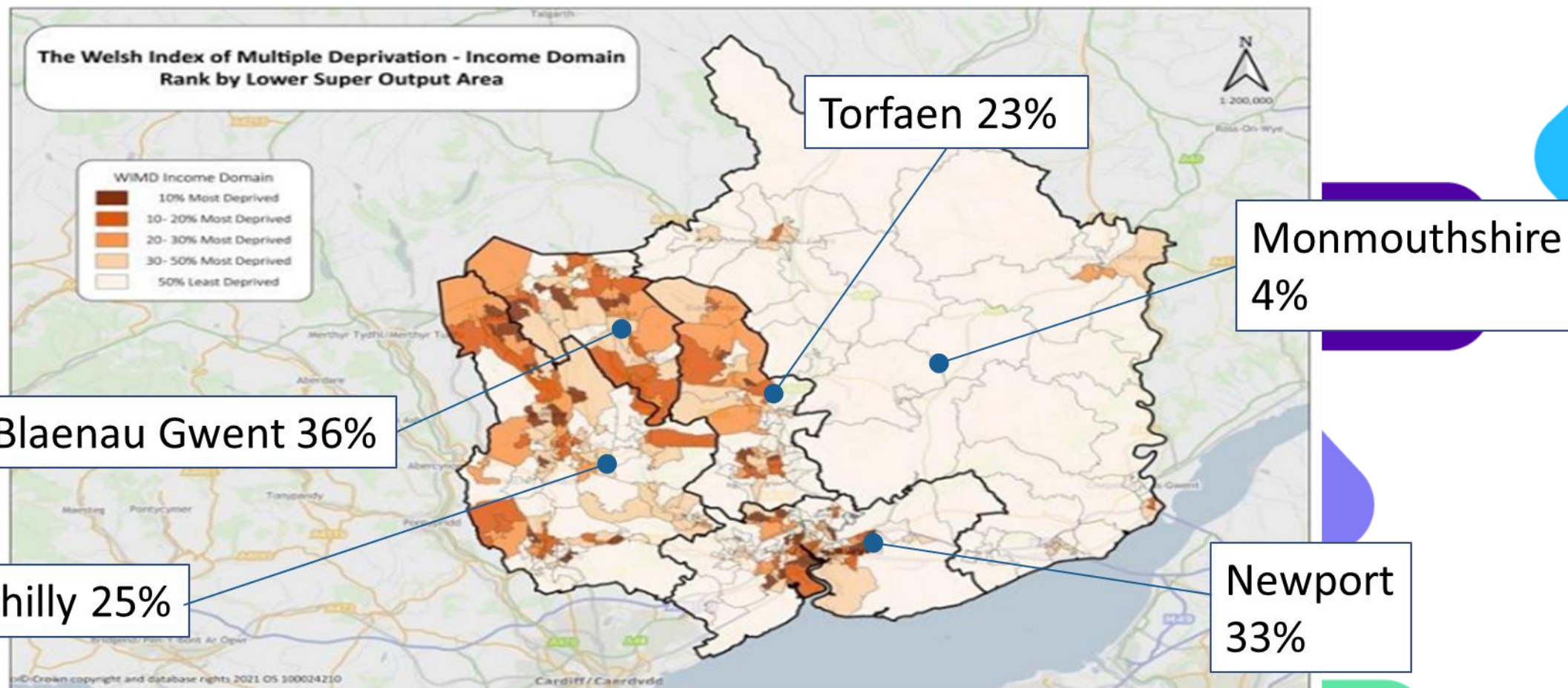
- March 2022: Gwent PSB formally agreed to work with IHE to become **1st Marmot region in Wales** – this signals strategic intent to address inequities across Gwent
- Taking a 'social determinants lens', using Marmot 8 Principles to help decide actions to improve health & wellbeing in Gwent
- 2019 DPH report, Building a Healthier Gwent, had the ambition that, 'In 2030, the places where we live, work, learn and play make it easier for people in our communities to live healthy, fulfilled lives.'



'Inequities within society are due to **unjust and unfair** differences in the conditions in which people are born, grow, live, work, and age.'

- Marmot Review 10-years on

## Distribution & impact of socioeconomic inequality:

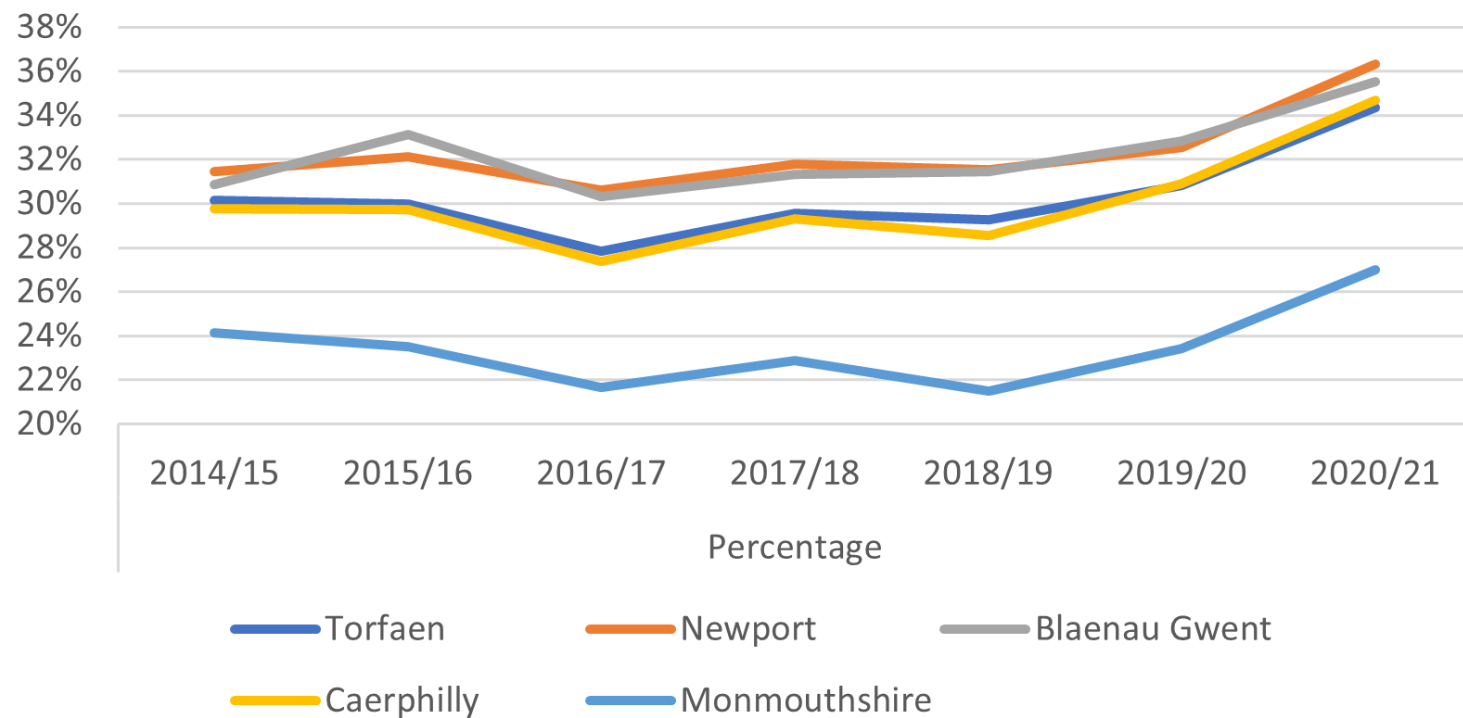


Percentage of lower super output areas (LSOAs) in the highest 20% (fifth quintile) for income deprivation in Wales (WG, 2019)

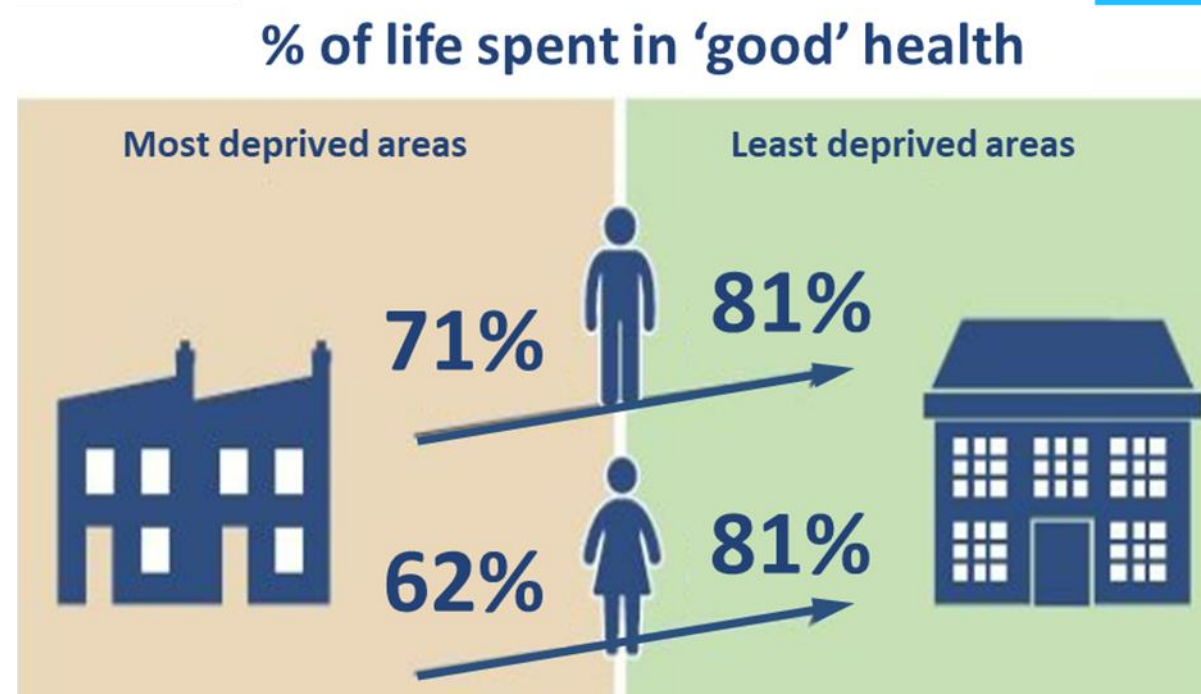
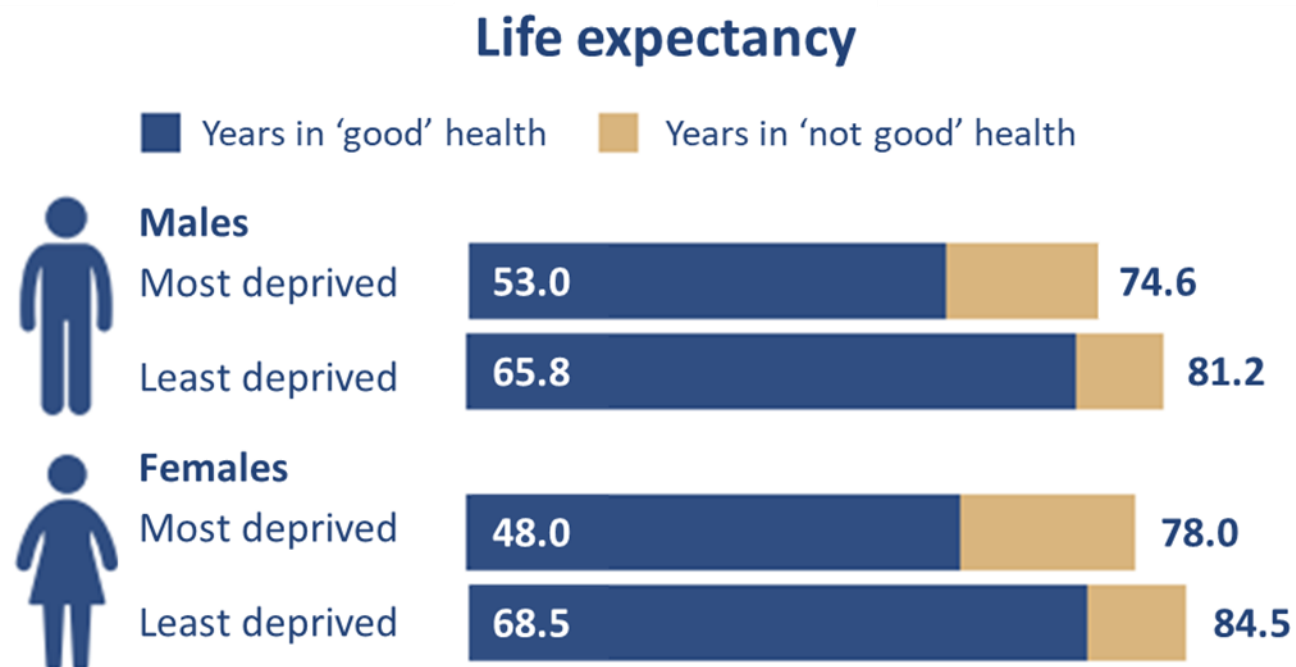


## Distribution & impact of socioeconomic inequality: Children living in poverty

Children 0-15yrs living in households with <60% median income  
after housing costs.



## Distribution & impact of socioeconomic inequality: Life & healthy life expectancy 2018-20

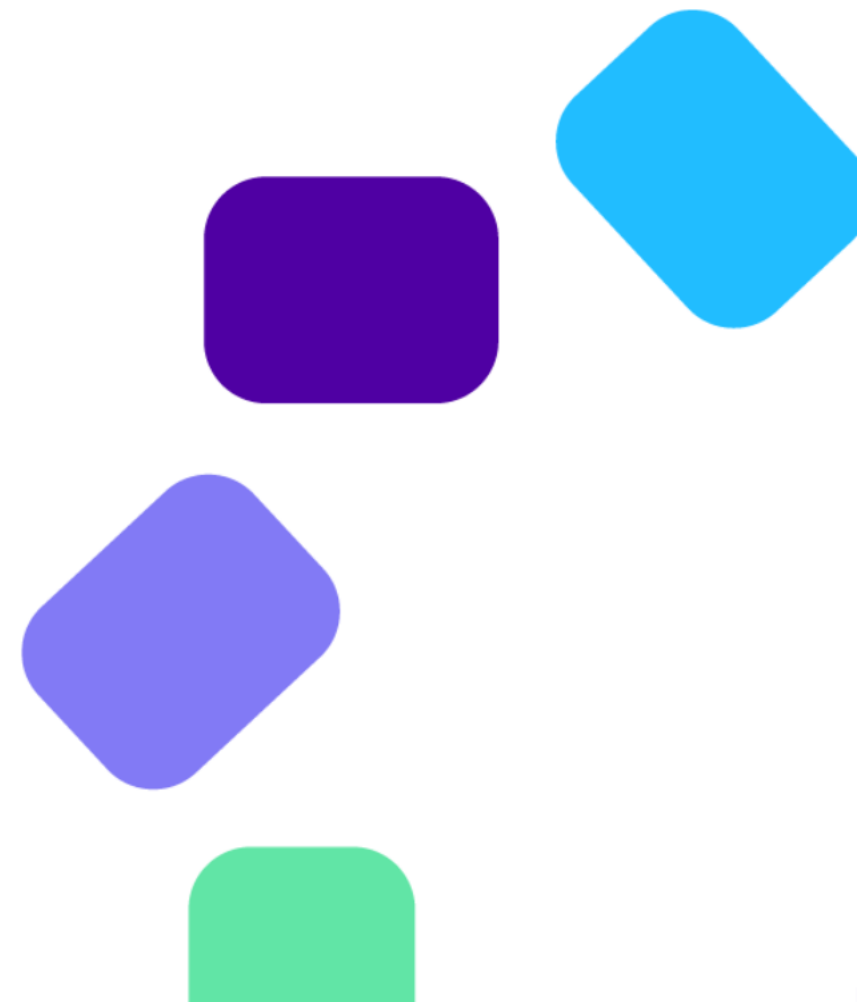


LE and HLE follow the 'social gradient in health'



## Who has led this work so far?

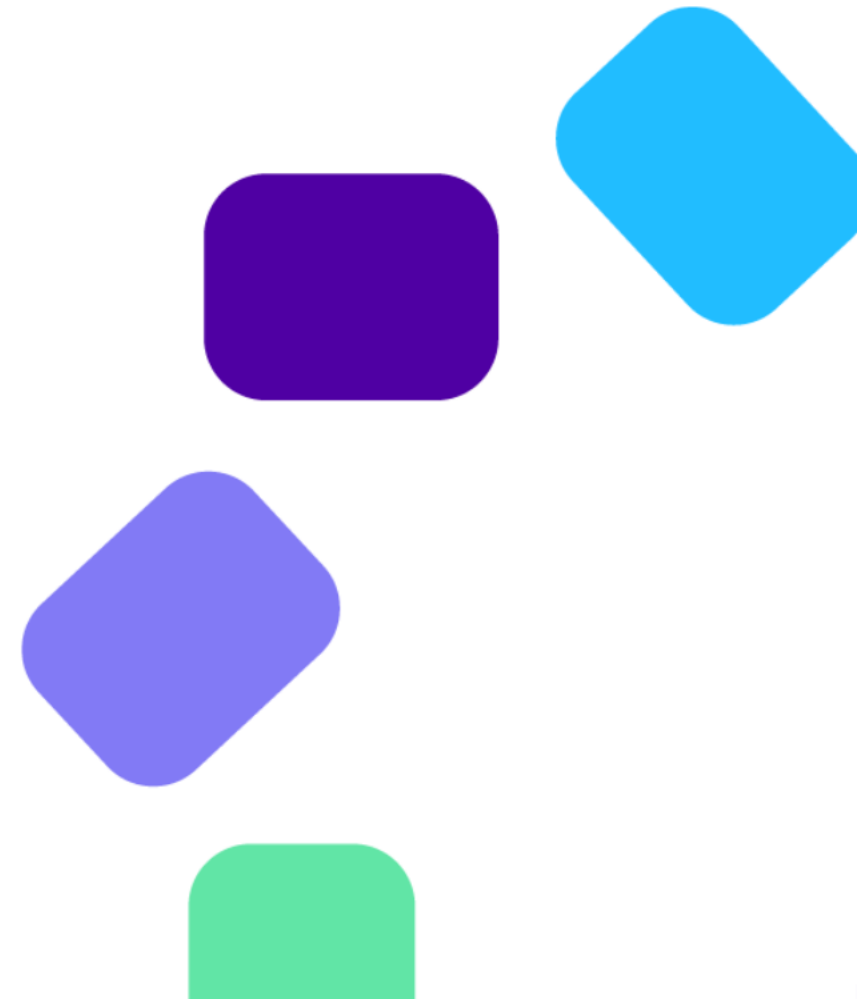
- Institute of Health Equity
- ABUHB Public Health Team – Building a Fairer Gwent team
- BAFG Leadership Group:
  - Monmouthshire & Torfaen Councils
  - Welsh Gov
  - BAFG team
  - Gwent Association of Voluntary Organisations (GAVO)
  - Tai Calon housing
- BAFG Planning Group
- Gwent PSB's 8 statutory members (via leadership group)



## The Marmot 8 Principles:

- Give every child the best start in life.
- Enable all children, young people and adults to maximise their capabilities and have control over their lives.
- Create fair employment and good work for all.
- Ensure healthy standard of living for all.
- Create and develop healthy and sustainable places and communities.
- Strengthen the role and impact of ill health prevention.
- Tackle discrimination, racism and their outcomes.
- Pursue environmental sustainability and health equity together.

IHE promote 'proportionate universalism'



## What has the BAFG programme done so far?



## ***Gwent PSB Well-being Plan, 2023-28:***

### Objectives:

**We want to create a fairer, more equitable and inclusive Gwent for all.**

We want a climate-ready Gwent, where our environment is valued and protected, benefitting our well-being now and for future generations.

### Steps:

Take action to reduce the cost of living crisis in the longer term.

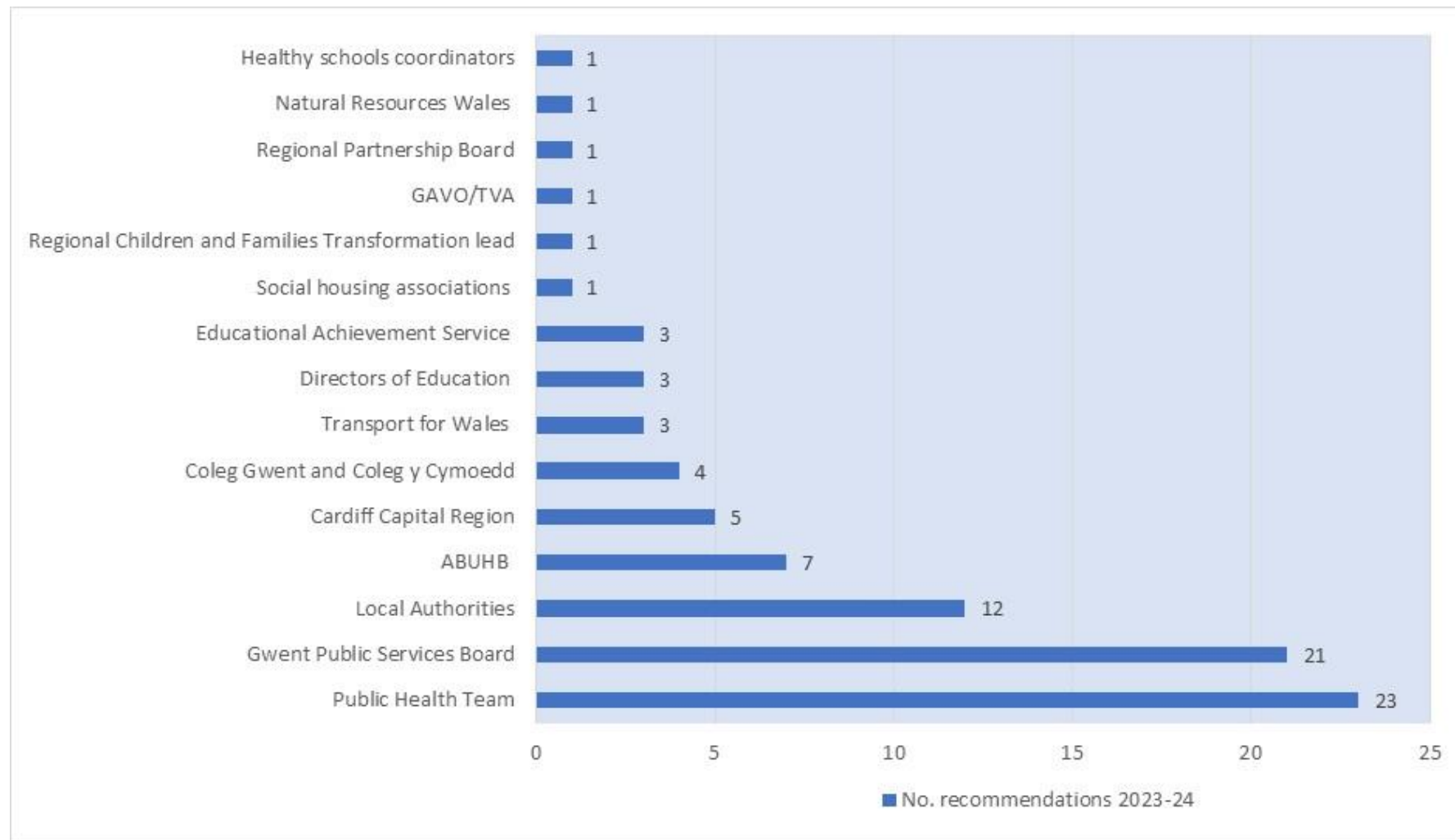
Provide and enable the supply of good quality, affordable, appropriate homes.

Taking action to reduce our carbon emissions, help Gwent adapt to climate change, and protect and restore our natural environment.

**Take action to address inequities, particularly in relation to health, through the framework of the Marmot Principles.**

Enable and support people, neighbourhoods, and communities to be resilient, connected, thriving and safe.

# The recommendations: accountable leads



Some (national)  
actions at Welsh Gov  
level also

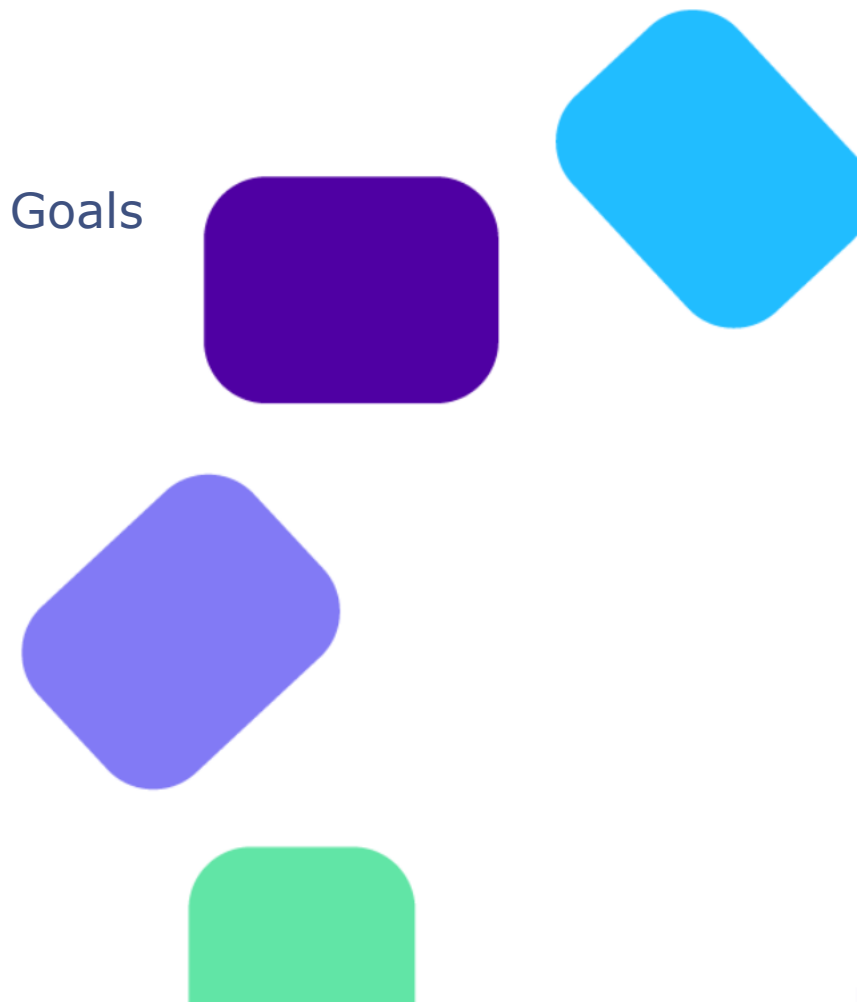
## Possible 'Quick wins' - achievable by March 2024

| IHE Recommendation  | Marmot Principle                                    |
|---|---|
| The Gwent PSB Marmot Programme Leadership Group becomes an Implementation Board and oversees development of an implementation plan, based on this report                  | N/A, systems recommendation                         |
| Review exercise on referral and social prescribing offers to ensure they are addressing the social determinants of health and offered to citizens living on lower incomes | Strengthen role and impact of ill-health prevention |
| Define best start and school readiness in Gwent in partnership with parents, early years staff and health   | Give every child the best start in life             |
| Assess hygiene poverty in Gwent, identify local indicator   | Ensure a healthy standard of living for all         |
| Assess use and value of Socioeconomic Duty within PSB members   | Ensure a healthy standard of living for all         |



## What are some of the challenges ahead?

- Time – programme team contracted for one year only
- Maintaining momentum / longevity
- How to use IHE recommendations alongside national Well-being Goals for Wales (Well-being of Future Generations Act)
- Monitoring and evaluation – showing change
- Number of partners involved / systems working
- Making a real difference to the people of Gwent



## Building a Fairer Gwent and the socio-economic duty



**Alignment of aims** - 'Socio-economic Duty aims to deliver better outcomes for those who experience socio-economic disadvantage... [and] reduce the inequalities of outcome resulting from socio-economic disadvantage'



BAFG is a '**new and innovative**' approach to addressing socio-economic disadvantage and resulting inequities in Gwent



**3 lenses:** communities of place, communities of interest and intersectionality – Marmot Principles address all of these



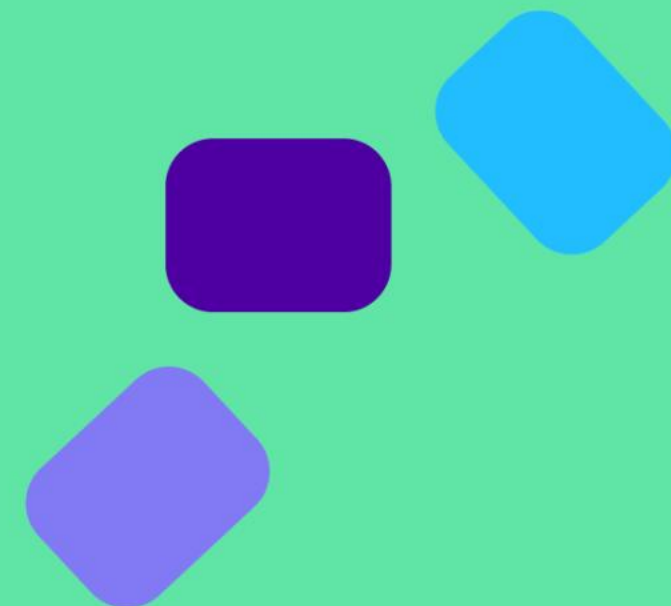
**Systems working** – new Gwent PSB Well-being Plan & IHE report for Gwent are mechanisms for systems change



# Thank You

<https://www.gwentpsb.org/en/gwent-marmot-region/>

caroline.mcdonnell@wales.nhs.uk



# Implementing the Duty in practice - 5-stage approach - assessment

Wales Health Impact Assessment Support Unit

8<sup>th</sup> June 2023



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# Could Health Impact Assessment (HIA) be a tool to support the implementation of SED and other duties placed on Public Bodies?

## Making the case.....



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# What Is Health Impact Assessment?

HIA is a tool to support the understanding and implementation of **Health in All Policies (HiAP)**. Welsh Government Policies are developed through the lens of HiAP.

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**“Health Impact Assessment (HIA) is a combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population”**  
(WHO Europe 1999, The Gothenburg Consensus)

**“Health in all policies is an approach to public policies that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts, in order to improve population health and health equity”**

(8<sup>th</sup> Global Conference on Health Promotion, Helsinki 2013)

‘Normal service has been resumed[since Covid-19].  
And now we’ve gone back to **making poor people poorer**.  
That’s the way we run our **economy**’ he said. ‘But that  
is changeable. That’s not a given’.  
(Sir Michael Marmot , Conference May 2023)

‘.....the impact of **inequality** on life expectancy  
is worse than 6 covid pandemics and is  
contributing to excess mortality’.  
(speaker at conference May 2023)



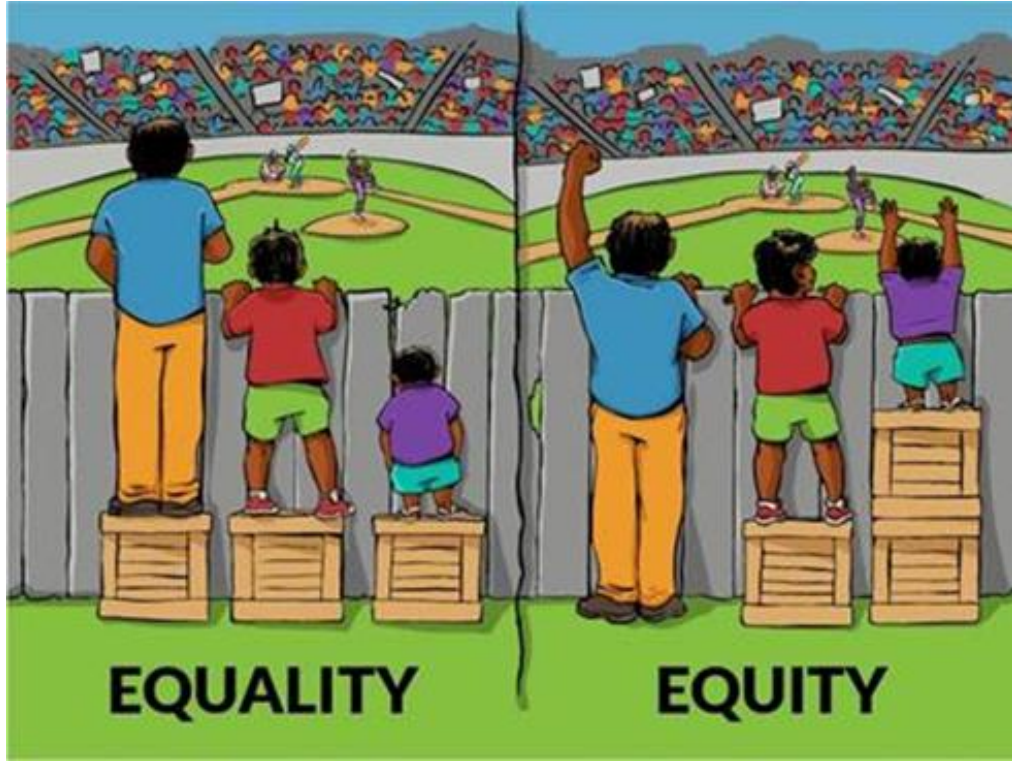
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**Common denominators =  
inequalities and people**

# Equity and Equalities

- **SED** – inequalities associated with socio-economic factors
- **Public Sector Equality Duty** – equality of opportunity who share protected characteristics
- **Well-being of Future Generations Act 2015** – A Healthier and more equal Wales
- **Public Health Act 2017** – HIA Regulations (to be implemented) – addressing health inequalities

All these duties are focused on-

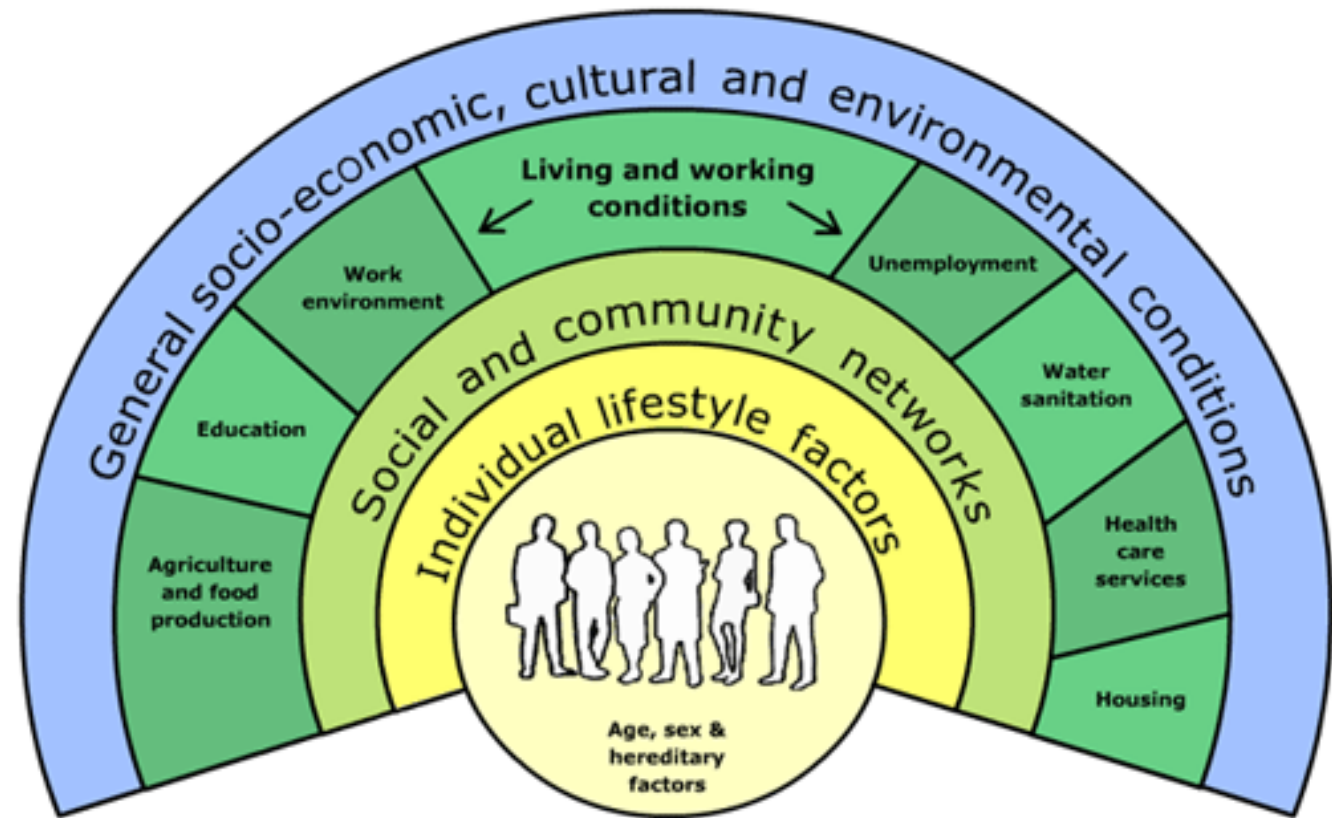
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‘A more equal Wales’ a national goal. It defines this as ‘a society that enables people to fulfil their potential no matter what their background or circumstances (including their socio-economic background and circumstances)’.

(Welsh Government, Programme for Government: update, December 2021)

# HIA methodology informed by:

The Main Determinants of Health



- Health and wellbeing
- Inequality/inequity
- Wider/social determinants of health



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# Key considerations in HIA

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- The whole population but importantly **identifying specific groups in the population** that share characteristics and circumstances (intersectionality) that could be affected by the policy, strategy, plan, project or decision being taken.
- **Wider determinants** – taking those groups identified and considering the relationship and outcomes for them through the lens of those wider determinants.
- **Context** – placing those considerations within the context of what is being planned and any potential cumulative impacts

# Mapping the HIA Assessment Framework to the legal duties - Population Groups

| Population groups considered in HIA                                  | SED and Equality considerations  |
|--|--|
| Age related groups   | Age (protected characteristic)   |
| Sex and gender related groups  | Sex (protected characteristic)<br>Gender reassignment (protected characteristic)<br>Pregnancy and maternity (protected characteristic)   |
| Groups at higher risk of discrimination or other social disadvantage | Race (protected characteristic)<br>Sexual orientation (protected characteristic)<br>Disability (protected characteristic)<br>Religion, belief or non-belief (protected characteristic) |

## Population groups continued-

| Population groups considered in HIA | SED and Equality considerations  |
|-------------------------------------|--|
| Income related groups               | Economically inactive<br>Unemployed<br>People on low-income<br>People who are unable to work due to ill health<br>Materially disadvantaged<br>Benefit claimants<br>Insecure employment |
| Geographical groups and/or settings | Area disadvantage  |
| Other groups                        | Disability (protected characteristic)<br>Marriage or civil partnership (protected characteristic)  |

# Mapping the HIA Assessment Framework to the legal duties - determinants/circumstances to consider

| Wider determinants of health    | Wellbeing Goals   | SED and Equality considerations   |
|---------------------------------|---|---|
| Behaviours affecting health     | Healthier Wales   | Food poverty<br>Gambling<br>Smoking   |
| Social and community influences | Cohesive Communities,<br>Healthier Wales<br>Vibrant Culture and Welsh Language<br>Equal Wales | Neighbourhood wellbeing<br>Community cohesion<br>Discrimination<br>Social support |
| Mental health and wellbeing     | Cohesive Communities, A Healthier Wales   | Social participation and inclusion<br>Sense of control                            |



# Determinants/circumstances to consider continued

| Wider determinants of health        | Wellbeing Goals   | SED and Equality considerations                      |
|-------------------------------------|---|--|
| Living and environmental conditions | Resilient Wales, Healthier Wales, Equal Wales, Cohesive Communities   | Housing<br>Community safety<br>Access to green space |
| Economic conditions                 | Prosperous Wales<br>Equal Wales   | Employment<br>Income<br>Debt<br>Material assets      |
| Access to services                  | Healthier Wales, Cohesive Communities, Resilient Wales, Equal Wales<br>Prosperous Wales<br>Vibrant Culture and Welsh Language | Internet access<br>Transport<br>Accessible services  |

## Conclusions on approach

- Allows a holistic view to be taken initially covering all the relevant considerations for the duties and can then lead to more in-depth assessment for specific factors or population groups where concerns have been identified and supports the engagement process.
- Applying this approach has led to the development of combined assessment templates underpinned by HIA methodology i.e. Denbighshire County Council Assessment tool
- Shown to be helpful - Examples where HIA screening has been applied first to assess impacts. The results have been used to either inform elements of other assessments or directed decision makers to undertake further specific assessments – example Screening Services introducing the new FIT Test for Bowel Cancer Screening



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# Thank you....

Contact:

[lee.parrywilliams@wales.nhs.uk](mailto:lee.parrywilliams@wales.nhs.uk)

Resources, tools and guides can be found:

<https://phwwhocc.co.uk/WHIASU>

Consider joining the WHIASU HIA Network of Practice

Contact – [Michael.fletcher@wales.nhs.uk](mailto:Michael.fletcher@wales.nhs.uk) to be added to our distribution list



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# **The socio-economic duty in action**

Helen Flynn

8 June 2023



**justfair**

# 1ForEquality Campaign

Campaign to:

1. advocate that the UK Government enacts the socio-economic duty contained in Section 1 of the Equality Act
2. encourage local authorities in England to implement the duty at a local level

Work includes providing training, presentations and [practical tools](#) to encourage and aid implementation



<https://www.gmpovertyaction.org/>



<https://www.amnesty.org.uk/>



<http://justfair.org.uk/>



<https://www.equallyours.org.uk/>



<http://thrive-teesside.org.uk/>



<https://www.equalitytrust.org.uk/>



# The socio-economic duty in action

## Lead authors:

Megan Isaac (Just Fair) and Anna Lopez (Greater Manchester Poverty Action)

## Merseyside Fire and Rescue

- Used SED to review recruitment practices and identified that individuals experiencing socio-economic disadvantage were underrepresented in firefighter applications
- Realised that the driving license requirement for firefighter roles was a significant barrier to applying.
- Removed the driving license requirement for prospective firefighters
- Now offers driving license bursaries for successful applicants from 20 deprived areas of Merseyside with driving lessons offered in MFRS' training school, and MFRS paying the cost of driving tests and license fees.

195 extra firefighter applications in 2022, 48% of which are from the 10% most deprived areas of Merseyside.



# The socio-economic duty in action

## Hackney Council

- In July 2020, after the first wave of Covid19, Hackney Council used the limited breathing room to conduct a review into their response to the pandemic
- The equality review, with socio-economic disadvantage and its intersectional impacts centred, led to the formation of the Community Partnerships Network (CPN) – a partnership between the local authority, the Clinical Commissioning Group (CCG), and community sector and local businesses which provided culturally inclusive support to vulnerable, shielding, and isolated residents during the pandemic.
- Decision-making in crises such as Covid-19 is highly pressured due to time and resource constraints alongside significant uncertainty.
- But by embedding the Socio-economic Duty in a holistic approach to equality for over a decade, Hackney Council immediately recognised the unequal impacts of Covid-19 on people experiencing socio-economic disadvantage and other marginalised communities and had a planned and proactive response to equality and cohesion from the beginning of the crisis.

474 households directly referred to  
the CPN for funded help with food  
and essentials

# The socio-economic duty in action

## Harborough Council

- Aware of potential negative impact on mental health that debt could have – particularly in cost-of-living crisis
- Compounding impact for those experiencing multiple disadvantage and those who had not previously experienced debt or been in contact with support services.
- Tried to pre-empt by developing a set of resources to support people experiencing socio-economic disadvantage, often for the first time.
- In collaboration with Home-Start South Leicestershire and Citizens Advice Bureau, Harborough Council created a 'Financial First Aid Kit' to offer advice and support for people experiencing socio-economic disadvantage or financial hardship, with a particular focus on reducing negative health outcomes brought on by the crisis.

# Get in touch

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