

Developing a new Health and Wellbeing Strategy for Enfield

A report by Healthwatch Enfield

March 2019

1. Executive summary

Enfield's first Joint Health and Wellbeing strategy¹, as developed and agreed by the Health and Wellbeing Board², is reaching the end of its planned duration. This means a new strategy is required, setting out how partners will work together to improve the health and wellbeing of all Enfield residents and reduce health inequalities.

In April 2014, Enfield's Health and Wellbeing Board adopted the first Joint Health and Wellbeing Strategy, articulating a vision of '*Working together to enable you to live longer, healthier, happier lives in Enfield*' with a focus on five key priority areas, including:

- Ensuring the best start in life
- Enabling people to be safe, independent and well and delivering high quality health and care services
- Creating stronger, healthier communities
- Reducing health inequalities - narrowing the gap in life expectancy
- Promoting healthy lifestyles and making healthy choices

Five years on, the strategy is ending, placing a duty on the members of Enfield's Health and Wellbeing Board to produce the second Joint Health and Wellbeing Strategy for the borough.

Between December 2018 and February 2019, local people were given opportunities to share their views and inform the scope of the new strategy. An online survey was available for residents to complete alongside face-to-face engagement through RELDM, Reliable Distribution & Market Research³.

Healthwatch Enfield amplifies the voice of Enfield communities in relation to local health and social care services with a remit to involve local people in the development, commissioning and scrutiny of local health and care services. As part of supporting the strategy development, we have undertaken community outreach activity and worked alongside members of the Health and Wellbeing Board to host a community event, bringing local residents, key decision-makers and commissioners together to discuss the new Joint Health and Wellbeing Strategy.

In total, we heard from 152 local people and stakeholders who fed back that the new Joint Health and Wellbeing Strategy should focus on priority areas of:

- eating more healthily
- doing more physical exercise
- having positive mental health, including reducing social isolation

A comprehensive, early years or childhood education programme to normalise healthy lifestyles within communities should underpin the above. People identified **lifestyle changes** but also shared concerns about **access issues**. Local residents told us about barriers to moving toward a healthier lifestyle as well as ideas to

¹ https://new.enfield.gov.uk/healthandwellbeing/wp-content/uploads/2017/03/Enfield_Joint_Health_and_Wellbeing_Strategy_2014_19_FINAL_April_2014.pdf

² <https://governance.enfield.gov.uk/mgCommitteeDetails.aspx?ID=640>

³ <https://www.reldm.com/>

inform the Health and Wellbeing Board in developing a strategy, including measures of success. Feedback gathered by Healthwatch Enfield shows that local people understand what they can do towards improving their own health and that, in some instances, they need to be empowered and enabled to do this. In addition, Enfield residents seem to advocate a community approach that draws in a wider partnership including employers, supermarkets, cafes, gyms, parks, a range of community activities and social prescription as a way of making healthy choices, easy choices. Locally, there is a strong understanding of 'place' and of the challenges in different parts of the borough as well as the need to address these through committed leadership. The Health and Wellbeing Board have been discussing a '**Health in all Policies**' approach - local people's feedback seems to endorse this and points to a wider partnership focussed on creating a healthier Enfield.

By involving Enfield residents in discussions, Healthwatch Enfield was also able to facilitate a process of early co-design of activities that would enable individuals to make positive lifestyle changes to eat more healthily, to take part in more physical activity and to have good mental health. With a variety of ideas on offer, including 'car free days', gym buddy systems, 'healthy food ratings' and 'happy to talk' tables, members of Enfield's Health and Wellbeing Board have a unique opportunity to build on the co-design process undertaken to date to devise actions and initiatives owned and delivered with local people.

2. Introduction

The Enfield Health and Wellbeing Board was set up under the Health and Social Care Act 2012 to create a forum where the key leaders from the health and care system can work together to improve the health and wellbeing of the local population and reduce health inequalities.

Health and Wellbeing boards are a key part of the Government's broader plans to modernise the NHS and to:

- ensure stronger democratic legitimacy and involvement
- strengthen working relationships between health and social care, and,
- encourage the development of more integrated commissioning of services.

The Board aims to help give communities a greater say in understanding and addressing their local health and social care needs and includes Enfield Council, the NHS - both commissioners and providers of health services in the borough, Healthwatch and the local voluntary sector.

Enfield's first Joint Health and Wellbeing strategy, as developed and agreed by the Health and Wellbeing Board, is reaching the end of its planned duration. This means a new strategy is required, setting out how partners will work together to improve the health and wellbeing of all Enfield residents and reduce health inequalities.

Priorities from the current Health and Wellbeing strategy include:

- Ensuring the best start in life
- Enabling people to be safe, independent and well and delivering high quality health and care services
- Creating stronger, healthier communities

- Reducing health inequalities
- Promoting healthy lifestyles and making healthy choices

To evaluate the impact of the current strategic approach members of Enfield's Health and Wellbeing Board considered key outcome measures for each of the aforementioned priorities. Against each of the five priorities there are areas where local outcomes have either worsened since 2014, or where they have improved but yet Enfield is performing worse than the national average. On this basis alone Health and Wellbeing Board members decided to change their approach.

The new Health and Wellbeing strategy wants to tackle health inequalities in the borough:

- life expectancy between different areas of the borough is a call for action - a gap of 8.5 years.
- people are spending too many years in 'poor health' instead of good health. For example, a female in Edmonton Green lives on average 28 years in poor health

There are three behaviours which have the biggest impact on people's health: physical inactivity, unhealthy eating, and smoking. A strong connection exists between these and mental health, as well as physical health.

In Enfield:

- 14.9% of adults smoke
- 27.7% of adults are physically inactive
- 42% of adults and 41% of 15 year olds don't eat the recommended 5 portions of fruit and vegetables a day
- Overweight or obese
 - One in four 4-5 year olds (24.9%)
 - Two in five 10-11 year olds (41.1%)
 - Three in five adults (61.4%)
- 9.9% of 5-16 year olds are estimated to have mental health disorders
- Between 10% and 15% of women are estimated to suffer from mid-moderate depressive illness and anxiety in the perinatal period
- 11% reported to suffer from anxiety and depression

Discussions held by members of Enfield's Health and Wellbeing Board propose a new vision for the borough's joint Health and Wellbeing strategy: *making the healthy choice the first choice for everyone in Enfield*, with resources being committed to delivering against four priority areas of:

- healthy eating
- smoking less
- more physical activity
- having positive mental health

Healthwatch Enfield has a clear remit to bring local people's views to decision-makers and commissioners. Since December 2018, we have committed resources to supporting members of Health and Wellbeing Board in involving local residents in conversations about the scope and focus of the new Health and Wellbeing Strategy. This was achieved by undertaking outreach activities and hosting a community event.

This report articulates feedback from 152 local people who engaged in conversations with Healthwatch Enfield.

3. Informing the priorities for the new joint health and wellbeing strategy: what would help you to be healthier and live well?

In developing a new Joint Health and Wellbeing Strategy for Enfield there is a responsibility on local decision-makers and commissioners to commit resources to delivering initiatives that matter to local people, contributing to improving individuals' wellbeing.

When asked, Enfield residents, who either participated in Healthwatch Enfield's annual conference or engaged with us through outreach activities, were clear that **eating more healthily and exercising more** are the top two initiatives that would contribute to making individuals be healthier and live well.

*“Healthy eating of fresh fruit and veg making it 5 a day”
“Would need balanced diet with access to variety of food choices”
“Need to walk more and more exercise”*

Lifestyle changes identified by local residents required to eat more healthily and to exercise more included:

- eating more vegetables and fruit and drinking more water,
- making healthier food more fun
- celebrating home cooked food
- taking up more activities
- join support groups or weight management groups

Having an **active and varied social life** was also recognised as important. Based on feedback gathered, putting focus on enabling individuals to take part in groups and activities would contribute to reducing social isolation whilst also being of direct benefit to communities.

*“Find a new hobby and affordable activities would help”
“Socialising and not feeling isolated could help. Maybe joining walking groups?”*

Leading an active and varied social life would require joining more clubs and groups, and encouraging community support.

Discussions held also focussed on the need to ensure that local people **have good mental health**. Tackling poor mental health was identified as an area of significant importance and one that impacts social isolation and may contribute to poor access issues. Stress levels were also an aspect highlighted that impacted on mental health, as well as health and well-being in general.

*“We need to take a holistic approach: make time for (the) mind, meditate”
“There needs to be support for people with mental ill health”*

Setting realistic personal goals and making more “me” time, getting more sleep and implementing better time management and work life balance, were all identified as key interventions that would contribute to good mental health.

Some local residents shared their concerns around **access issues** and how these contribute to poorer health and wellbeing outcomes. Those with Learning Disabilities, Deafness, Autism and their carers emphasised the challenges with obtaining information in relevant formats, limited availability of support and lack of inclusive groups, as key factors in preventing individuals from living healthier lives.

“There should be better targeted / specialised support for disadvantaged groups i.e. end of life care, people with LD, Deaf community.”

“People with learning difficulties and disabilities have much shorter life spans”
“Accessible communication is needed”

Other residents considered the role of **early years education** in helping us to live healthier lives. It was felt that it was not only vital to provide information helping people to understand cause and effect, but that this should happen in schools and with parents, and as soon as possible.

“We need to be normalising healthy lifestyle in schools; starting with families and children”

“Education around choices available is crucial”

“People need to know why we need to be healthy and consequences of not being healthy. We need factual information about food”

Analysis of data collected by Healthwatch Enfield, both from its annual conference and outreach activities revealed that only one comment was made about smoking less and two about drinking less as lifestyle choices that could help improve health and wellbeing of local residents. Given 152 local residents were engaged, and only three comments were made about smoking and drinking, this may warrant further exploration.

Looking at feedback gathered by Healthwatch Enfield, it is clear that local residents understand what is required of them to lead a healthier lifestyle. Which begs the question: ***‘what is stopping individuals from doing all this?’***

The answers were plentiful and included:

- **low household income** and the perceived costs of buying fruit, vegetables and other healthier food alternatives alongside the cost of paying for activities, such as gym, swimming and clubs
- **lack of access or support from services**, including IAPT⁴, GPs and mental health services, due to disability or equally, through a lack of funding and cuts contributing to long waiting times
- **lack of time and poor work-life balance** with local people telling Healthwatch Enfield they were time poor, working long hours and simply not having the time to be more healthy
- **perception of not feeling safe in open spaces**, such as parks, stopping individuals from undertaking low cost activities such as walking or cycling

⁴ IAPT – Improving Access to Psychological Services

- **easy access to unhealthy foods and convenience of preparing unhealthy meals**
- **existing habits and lifestyle** which enable individuals to cater for their everyday needs from the comfort of an armchair where shopping, social interactions and exercise are replaced by a tablet or an app

“Exercise can be expensive”.

“Price of healthier foods”.

“Severe lack of funding for mental health services”

“Communication difficulty. Access barrier. Not knowing where to go”

“Access to services. Lack of information about services”

“Long working hours”

“Public spaces can be perceived as unsafe.”

“Healthy choice seems boring. There is easy access to fast food”

“Habits are difficult to break”

If we are to make meaningful change, as one attendee at the conference put it, *“we have to get out of our comfort zones”* and start to look at how we change our behaviours.

4. What specific actions can be taken locally to help us achieve being healthier? How can we deliver against the proposed priority areas?

Co-designing its conference with the members of Enfield’s Health and Wellbeing Board, Healthwatch Enfield committed to involving local people in discussions about the potential actions that should be delivered against the potential priority areas of:

- healthy eating
- smoking less
- more physical activity
- having positive mental health

The following pages outline feedback, suggestions and ideas put forward by Enfield residents alongside local decision-makers and commissioners. These are underpinned by proposed measures of success.

More physical activity

What would help you?	What’s needed to make it work?
Feeling focused, determined and motivated to undertake physical exercise	<ul style="list-style-type: none"> ▪ Introducing a ‘gym buddy’ system where individuals can make contact with like-minded people to attend a gym or physical activity sessions together ▪ Introducing ‘first timer’ sessions in gyms to give people opportunities to not only learn more about the equipment but also to meet others

	<ul style="list-style-type: none"> ▪ Providing more group activities that are culturally appropriate to encourage uptake ▪ Providing accessible communication and information materials about physical exercise, its benefits and ways of exercising at low or no costs. These should be distributed through a variety of channels including GP surgeries and voluntary and community sector organisations ▪ Deploying, promoting and marketing Enfield-wide or community campaigns i.e. ‘mile a day’, themed days i.e. ‘Zumba day’ or ‘car-free day’
Exercise being affordable	<ul style="list-style-type: none"> ▪ Having access to open days and taster sessions at local gyms to learn more about exercise regimes ▪ Being eligible for discounts i.e. available to disadvantaged groups or those at risk who would benefit from physical exercise ▪ Having a social prescribing offer in Enfield that would make exercise free for individuals requiring it to improve their health and wellbeing outcomes ▪ Commissioning exercise classes run by grassroots groups, bringing physical activity to the communities
Having time to exercise	<ul style="list-style-type: none"> ▪ Employers introducing initiatives such as ‘activity at work’ or ‘one hour per week’ programme encouraging 10 minutes of physical activity per day ▪ Providing accessible communication and information materials around different types of exercise and its benefits such as climbing stairs, doing housework or taking one bus stop less ▪ Providing / commissioning respite for carers to have time and ability to take part in physical activity

Potential measures of success to assess the effectiveness of the proposed solutions, as suggested by local people include:

- No. of people reporting improved physical and / or mental health following an intervention
- No. of volunteer buddies in Enfield
- No. of people continuing physical activity after free / taster session
- Decrease in no. of people rated as overweight or obese
- Decrease in no. of people visiting their GP
- Decrease in no. of presentations within secondary care
- Patients / service users reporting improved health outcomes

Healthy eating

What would help you?	What's needed to make it work?
Limiting access to fizzy drinks, sugary or fatty food	<ul style="list-style-type: none"> ▪ Removing vending machines locally or replacing options available within them for healthier alternatives ▪ Removing cakes and unhealthy desserts from school meals
Understanding the impact of food choices	<ul style="list-style-type: none"> ▪ Health champions providing talks in schools and community settings ▪ Having accessible information and communication materials about healthy eating, underpinned by consistent messaging and narrative ▪ Having consistent food labelling in place with clear and bold colours and information
Making Enfield a ' <i>healthy food borough</i> '	<ul style="list-style-type: none"> ▪ Introducing 'healthy food rating' for local businesses ▪ Reducing tax rates for shops selling healthy food ▪ Introducing portion control within takeaways and food outlets ▪ Working with shops and supermarkets so they encourage 'healthy' choices i.e. by introducing healthy aisles ▪ Requiring 'fast food' outlets to offer 'healthy alternatives / choices' ▪ Working with large supermarkets to offer free fruit to anyone, not just children

Making healthy eating affordable

- Having access to ‘healthy cooking made easy on a budget’ classes to introduce concepts such as leftover vegetables being made into a soup. These should also be provided at schools
- Introducing special money discounts for disadvantaged groups or those at risk to encourage (and monitor) healthier life choices
- Introducing ‘savvy shopper discount scheme’, encouraging more people to shop on the high-street and not online whilst also monitoring healthier life choices
- Teaching money management and budgeting skills in schools earlier so that healthier alternatives are available to everyone
- Having access to lunch clubs / supper clubs where people can socialise, learn from one another and support to batch cook

Potential measures of success to assess the effectiveness of the proposed solutions, as suggested by local people include:

- Less people diagnosed with long-term conditions such as diabetes
- Patients / service users reporting better health outcomes following an intervention
- Decrease in the no. of people who are obese or overweight
- Decrease in the no. of people reporting social isolation following an intervention, through participating in various activities etc.

Having positive mental health

What would help you?	What’s needed to make it work?
Ability to self-care	<ul style="list-style-type: none"> ▪ Having access to information on how to look after one’s mental health and where to seek help if things deteriorate ▪ Availability of an extensive directory of all services and pathways to access both physical and mental health support ▪ Learning mindfulness including by children of school age ▪ Having a social prescribing offer in Enfield that delivers activities which are evidence-based

	and improve both mental and physical health outcomes
Feeling good about yourself	<ul style="list-style-type: none"> ▪ Having a social prescribing offer in Enfield that offers support with weight management such as slimming world or gym membership ▪ Having access to free activities for children and young people, in particular over the summer period ▪ Having access to intergenerational activities such as visits to school and homework clubs ▪ Having access to a range of volunteering opportunities
Community assets	<ul style="list-style-type: none"> ▪ Introducing a ‘happy to talk’ table in cafes and restaurants where members of the public can engage in social interaction, improving mental health wellbeing and reducing social isolation ▪ Utilising empty spaces / shops on the high street to deliver community or grassroots initiatives ▪ Setting targets for local employers to work with the community or community organisations to support initiatives that improve mental health and wellbeing ▪ Having education professionals trained in mental health so that they can offer more support to young people ▪ Having access to commissioned peer support and befriending initiatives ▪ Availability of ‘happiness cafes’ either based on the concept developed by Action for Happiness or one that has been co-designed locally
Improved provision of mental health support	<ul style="list-style-type: none"> ▪ Having access to services that have been co-produced with service users and their carers ▪ GPs having better understanding of mental health including warning signs and symptoms ▪ Having access to mental health first aid trained professionals and peers

	<ul style="list-style-type: none"> ▪ Having improved access to IAPT i.e. through provision by Voluntary and Community Sector organisations ▪ Having access to culturally appropriate / sensitive interventions and services ▪ Having clear pathways and support for people with mental health needs in place and co-designed with service users and their carers
Reducing stigma around mental health	<ul style="list-style-type: none"> ▪ Having better education in schools, giving pupils understanding of mental health issues and their impact ▪ Enfield communities having understanding of the spectrum of mental health ▪ Having access to family group conferencing for families where someone has mental ill-health ▪ Having access to more practical information and support for families e.g. books on how to support someone with mental ill health

Potential measures of success to assess the effectiveness of the proposed solutions, as suggested by local people include:

- Decrease in no. of referrals to secondary mental health services
- Decrease in prescription of drugs to regulate mental health like anti-depressants
- Patients / service users reporting positive outcomes around mental health and wellbeing
- Patients / service users reporting shorter waiting times for IAPT
- Reduction in the no. of people reporting self-harm, particularly amongst young people
- Reduction in no. of people reporting social isolation following an intervention
- Improved physical health outcomes

In addition to discussing actions and interventions that would contribute to positive mental health, local people were also clear about the need to integrate mental and physical health services. In their opinion, this will require: a review of pathways, closer working between professionals and an integrated IT system.

Smoking less

What would help you? | What's needed to make it work?

Vaping	<ul style="list-style-type: none"> ▪ Offering a free vaping starter pack to anyone interested in giving up smoking ▪ Publicising the financial benefits of vaping over smoking
Understanding the financial implications of smoking	<ul style="list-style-type: none"> ▪ Providing accessible information about the costs of smoking and cheaper alternatives
Deploying 'making every contact count' initiatives within secondary care settings	<ul style="list-style-type: none"> ▪ Prescribing nicotine in acute hospitals
Investing in prevention	<ul style="list-style-type: none"> ▪ Partners contributing to 'smoking prevention fund' enabling the local health and care economy to design, deploy and evaluate effective initiatives
Expanding smoking bans	<ul style="list-style-type: none"> ▪ Having support from the community and enforcing peer pressure

Potential measures of success to assess the effectiveness of the proposed solutions, as suggested by local people include:

- Reduction in the no. of people who smoke

5. Conclusions

Enfield's first Joint Health and Wellbeing strategy, as developed and agreed by the Health and Wellbeing Board, is reaching the end of its planned duration. This means a new strategy is required, setting out how partners will work together to improve the health and wellbeing of all Enfield residents and reduce health inequalities.

In developing its new strategy, Enfield's Health and Wellbeing Board is considering the potential priority areas of:

- healthy eating,
- smoking less,
- more physical activity and
- having positive mental health

as objectives of its new Joint Health and Wellbeing strategy. Based on the feedback gathered by Healthwatch Enfield, the majority of these resonate with local people who suggested focus on:

- eating more healthily

- doing more physical exercise
- having positive mental health, including reducing social isolation

A comprehensive, early years or childhood education programme to normalise healthy lifestyles within communities should underpin the above. Local people also felt that improving access to existing services would enable them to live healthier lifestyles. People gave us a lot of feedback about barriers to moving toward a healthier lifestyle as well as a wide range of suggestions and ideas to inform the Health and Wellbeing Board in developing a strategy which includes measures of success. This exercise shows that local people understand what they can do towards improving their own health and that in some instances they need to be empowered and enabled to do this.

But how do we go about helping people to eat more healthily or do more physical exercise? By involving Enfield residents in discussions, Healthwatch Enfield started the process of early co-design of activities that would enable individuals to make positive lifestyle changes. With a variety of ideas on offer, including 'car free days', gym buddy systems, 'healthy food ratings' and 'happy to talk' tables, members of Enfield's Health and Wellbeing Board have a unique opportunity to build on the co-design process undertaken to date to devise actions and initiatives owned and delivered with local people.