



LONDON BOROUGH OF
HARROW

Report for:

Health and Wellbeing Board

Date of Meeting:

2 November 2023

Subject:

Annual report of the Director of Public Health

Responsible Officer:

Carole Furlong, Director of Public Health

Public:

Yes

Wards affected:

All

Enclosures:

Annual Report

Section 1 – Summary and Recommendations

This front sheet accompanies the main report. It covers background and introduction; some of the main findings of the report; how to make the most of the report and key recommendations.

The Annual Report of the Director of Public Health is an independent report from the Director of Public Health which reflects the local population's health and wellbeing needs. It addresses different topic each year, raising awareness and highlighting some of the key issues and challenges within the borough.

Previous years have focused on green spaces in Harrow, and local ward level health profiles. This year, the Annual Director of Public Health Report explores health inequalities in Harrow. Health inequalities are avoidable, unfair and systematic differences in health between different groups of people.

The aim is for this interactive report to be used as a resource that highlights and compares a range of health inequalities in different dimensions across Harrow's diverse population and considers some of the ways we can address these inequalities. The report uses a lot of data from the 2021 Census, considered the best estimate available of the Harrow population and an opportunity to assess some of the inequalities among residents in Harrow, along with a range of other data sources.

Key recommendations from the report include:

- Complete a deep-dive into the impact of poverty on the wellbeing of Harrow residents, hearing from residents affected and taking into account best practice & guidance to tackle this challenging issue.
- Improving the recording of data in health, care and other relevant partners, in particular for:
 - Sexual orientation and trans status
 - Veterans
 - Asylum seeking status

Recommendations:

The Board is requested to:

- note the findings of the report
- support the recommendations of the report.

Section 2 – Report

- **How the report should be used**
 - This is an innovative report that is designed to encourage an interactive experience for the reader and audience.
 - It should be used as a reference point for understanding where health inequalities exist within Harrow, as evidence for building the case for change to address these avoidable and unfair differences, and to suggest approaches to tackle these issues.
 - The reader is prompted to use the navigation bar / menu to navigate through the report. This menu focusses on the population groups affected by health inequalities and each section encompasses a summary about health issues including risk factors, outcomes and services, as well as best practice in addressing the inequalities highlighted. Some maps and tables expand when they are clicked on, providing more detail for the reader to consider.
- **Findings from the report**
 - Harrow's population is growing, between the last two censuses (held in 2011 and 2021), the population of Harrow increased by 9.3%, from just under 239,100 in 2011 to around 261,200 in 2021.
 - Our population is also aging, with over 65s making up a growing percentage of residents, an increase of 19.4% in this age group since the last census. This is expected to further increase over the next 5-10 years.
 - Over half of residents responding to the 2023 residents survey report using less water, energy or fuel to save money, this increases to 72% amongst residents struggling to make ends meet. 43% of residents struggling to make ends meet reported they were buying less food to save money.
 - Smoking rates in the most deprived areas in Harrow are almost one in five adults, versus 1 in 10 in the least deprived areas.
 - One in five households across Harrow include one disabled member
 - Disabled residents are more likely to live in the more deprived parts of the borough.
 - Over 20,000 people reports being informal carers
 - There are over 1,000 households in temporary accommodation in Harrow in 2021/22

- Fewer than 500 adults in Harrow were recorded on local GP recorded as being in some form of homelessness, of these 44.5% were smokers, a much higher rate than average
- More than half of residents of Harrow were not born in the UK
 - In Harrow, residents who don't speak English well, or at all, are more likely to live in more deprived parts of the borough.
 - During 2022/23, 670 immigrants received support from Harrow.
 - Evidence suggests there are higher levels of stress depression, anxiety and poor general mental health among migrants.
- Over 2,700 veterans over the age of 16 live in Harrow
 - 31% of veterans living in Harrow report having a disability, compared to 14% in the rest of the population (there will be a strong link with age)

■ Recommendations

- The wider determinants of health (building blocks of good health e.g. housing, education, employment) are intrinsically linked to poverty, resulting in poor health outcomes and experiences in more deprived communities, or those that struggle to make ends meet. A deep-dive into the impact of poverty on the wellbeing of Harrow residents, hearing from residents affected and taking into account best practice & guidance to tackle this challenging issue will support better understanding the problem and what can be done to address it.
- To support better understanding the needs of those experiencing health inequalities, improve the recording of data in health, care and other relevant partners, in particular for:
 - Sexual orientation and trans status
 - Veterans
 - Asylum seeking status

Financial Implications/Comments

Whilst there are no additional direct financial implications arising from this report, the prioritisation of the recommendations, through the wider system, will need to be contained within existing partner resources, which includes the annual public health grant.

Legal Implications/Comments

Section 116A of the Local Government and Public Involvement in Health Act 2007, stipulates that it is the responsibility of the local authority and integrated care boards to prepare a local health and wellbeing strategy.

The Health and Social Care Act 2012 provides responsibility to the Health and Wellbeing Board for the oversight of the local health and wellbeing strategy.

A key responsibility of the Health and Wellbeing Board is to therefore have oversight and accountability of the proposed strategy.

Risk Management Implications

The health and wellbeing strategy does not present any risks, or suggest any mitigation

Risks included on corporate or directorate risk register? **No**

Separate risk register in place? **No**

The relevant risks contained in the register are attached/summarised below.
n/a

Equalities implications / Public Sector Equality Duty

Was an Equality Impact Assessment carried out? **No**

The focus of this year's Annual report for the Director of Public Health is health inequalities. The report highlights unjust and unfair inequalities experienced by residents and those protected under the equality act. The report makes recommendations, based on evidence and best practice, around how these inequalities can be addressed, to improve the health outcomes and experiences of those impacted by health inequalities.

Council Priorities

A place where those in need are supported

Section 3 - Statutory Officer Clearance (Council and Joint Reports)

Statutory Officer: Donna Edwards
Signed on behalf of the Chief Financial Officer
Date: 17/10/2023

Statutory Officer: Sharon Clarke
Signed on behalf of the Monitoring Officer
Date: 19/10/2023

Chief Officer: Senel Arkut
Signed by the Corporate Director
Date: 19/11/2023

Mandatory Checks

Ward Councillors notified: NO as it impacts on all Wards

Section 4 - Contact Details and Background Papers

Contact: Carole Furlong, Director of Public Health
Carole.Furlong@harrow.gov.uk

Background Papers:

[Harrow Health and Wellbeing Strategy](#)

If appropriate, does the report include the following considerations?

- | | |
|-----------------|----|
| 1. Consultation | NO |
| 2. Priorities | NO |