

Inequalities in mental health

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Aims



Increase knowledge about health inequalities to inform MH clinical practice

Be aware of the barriers to increasing physical activity during covid 19

Share ways of working to reduce the effect of health inequalities.

Health inequalities



Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. Health inequalities arise because of the conditions in which we are born, grow, live, work and age. These conditions influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing.

<https://www.england.nhs.uk/ltphimenu/definitions-for-health-inequalities/>

Overlapping dimensions of health inequalities

Socioeconomic groups and Deprivation

e.g. unemployed, low income, deprived areas

Inclusion health and vulnerable groups

e.g. homeless people, Gypsies, Roma and Travellers, sex workers, vulnerable migrants, people who leave prison

Protected Characteristics in the Equality Duty

e.g. age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation

Geography

e.g. urban, rural, coastal

<http://wecommunities.org/tweet-chats/chat-details/5606>

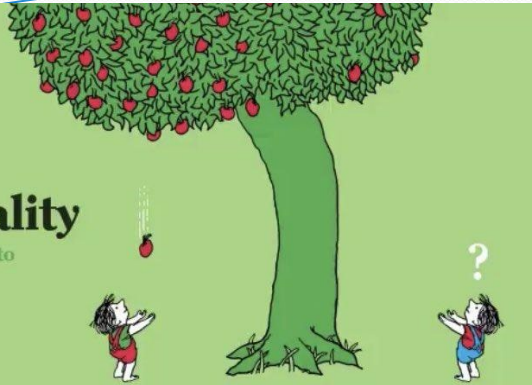
Service considerations

- homelessness; not having a permanent residence
- those who's accommodation is insecure which includes all Gypsy, Roma and Traveller populations
- understanding the system; includes those who don't speak English or with language barriers, those with learning disabilities and mental health issues
- refugees asylum seekers and migrants to the UK will have a range of health needs and challenges in accessing the system,
- those in the criminal justice system; move around frequently and fall between services and face discrimination
- those who are unable to access services or prevented from accessing support as a result of abuse, domestic abuse or modern slavery or trafficking
- ill health physical or mental health can impact on a person's ability to be included
- those who are marginalised and feel stigmatised due to their sexuality or gender or perceptions within social and cultural groups of diseases such as TB or HIV.

Ref. <https://www.rcn.org.uk/clinical-topics/public-health/inclusion-health-care>

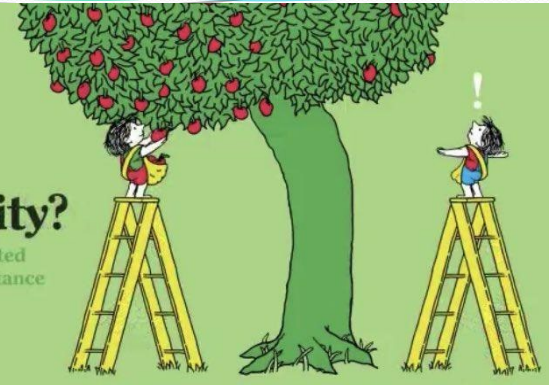
Inequality

Unequal access to opportunities



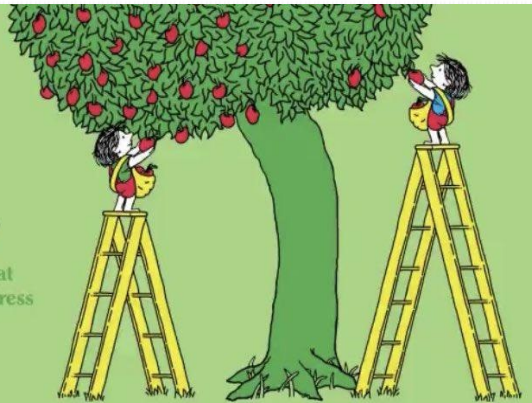
Equality?

Evenly distributed tools and assistance



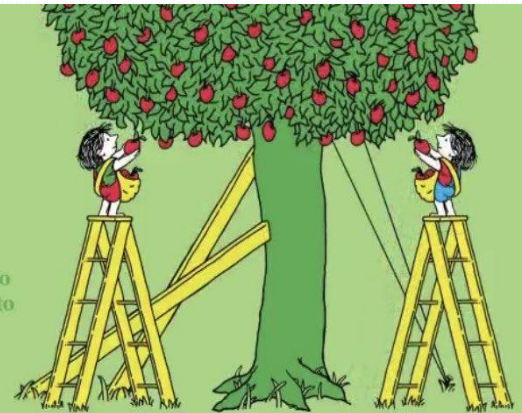
Equity

Custom tools that identify and address inequality



Justice

Fixing the system to offer equal access to both tools and opportunities



People coming out as Transgender

Two in five trans people (41 per cent) said that healthcare staff lacked understanding of specific trans health needs when accessing general healthcare services in the last year.

Almost half of trans people (46 per cent) have thought about taking their own life in the last year, 31 per cent of LGB people who aren't trans said the same.

'Coming out as transgender was the hardest thing I've ever done, and having to explain it over and over again to medical professionals that were supposed to be helping me, almost made me end my life. There needs to be better support for us. Henry, 24 (Yorkshire and the Humber).

[https://www.stonewall.org.uk/system/files/lgbt_in_britain
- trans_report_final.pdf](https://www.stonewall.org.uk/system/files/lgbt_in_britain_-_trans_report_final.pdf)

Deliverable messages

Smoking cessation

Physical activity

Sexual health

Cardiovascular health

Diabetes

Obesity

Other Metabolic diseases

MI = 10-15 years reduction in lifespan.

1/3 of all smokers are those with mental illness

SMI -Considerably less likely to be active (Stubbs et al)

LGBTQ population, globally increased risk of poorer MH and PH, increased suicide rates, and LGB population less satisfaction in NHS MH services

Discussion point

Jump into a network room to discuss;

How do you address health inequality in your practice?

What experience do you have about using population data in your work place and at home?

Feedback

Covid 19

- Pandemic had an impact on MH and wellbeing
- Woman and younger adults report worse MH and Wellbeing than older males
- Compounded the differences already present
- Shielded population moving less often/less intensity

WHOLE OF GOVERNMENT SOLUTIONS FOR PHYSICAL INACTIVITY

This global action plan provides a "systems-based" roadmap for all countries to enable national and subnational action to increase physical activity and reduce sedentary behaviour.

Increasing physical activity requires a systems-based approach – there is no single policy solution

WHAT IS A 'SYSTEMS-BASED' APPROACH?

A systems-based approach recognizes the interconnectedness and adaptive interaction of multiple influences on physical activity. It shows the numerous opportunities for policy action by different stakeholders to reverse current trends in inactivity and how they interact on multiple levels.

Implementation requires a collective and coordinated response across the settings where people live, work and play by all relevant stakeholders, at all levels, to ensure a more active future.



Numbers shown refer to the recommended policy actions. For full details refer to the main report.

Inequalities in physical activity



37.0%

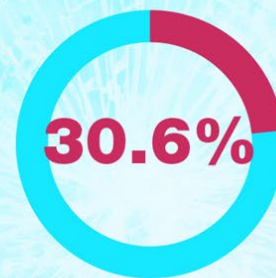
of disabled people
were inactive



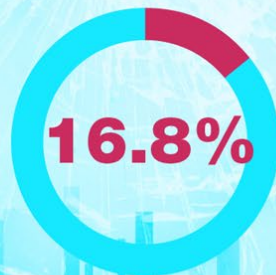
18.2%

of those with no
disabilities
were inactive

Physical inactivity data (less than 30 minutes per week)



of people
from the
most
deprived decile



of people
from the
least
deprived decile



Physically active people have lower health risks

Cognitive decline

↓40%

Type 2 diabetes

↓35%

Hypertension

↓33%

Depression

↓48%



All-cause mortality

↓30%

Bone fractures

↓66%

Breast cancer

↓20%

Coronary heart disease and stroke

↓25%

Colorectal cancer

↓19%

Where are we now?

- Half of 'shielders' report not being to walk as far
- 1 in 3 report less steady on feet and less independent
- Functional declines affecting ADLs
- Reduced confidence to attend healthcare appts

“Arthritis knee got worse as have been unable to swim.”

(Female, 80-84)

“Having already had health problems, it’s been accelerated and have lethargy, no strength and walking problem. As I was fine before, feel life has been cut short.”

(Female, 70-74)

https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/health--wellbeing/the-impact-of-covid-19-on-older-people_age-uk.pdf

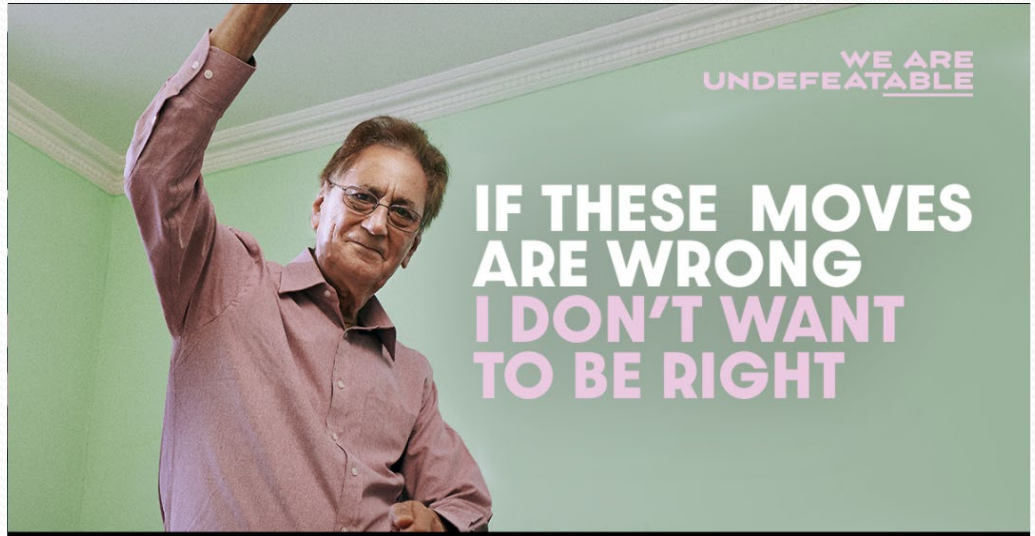
provided Slide courtesy of Dr Anna Lowe@annalowephysio



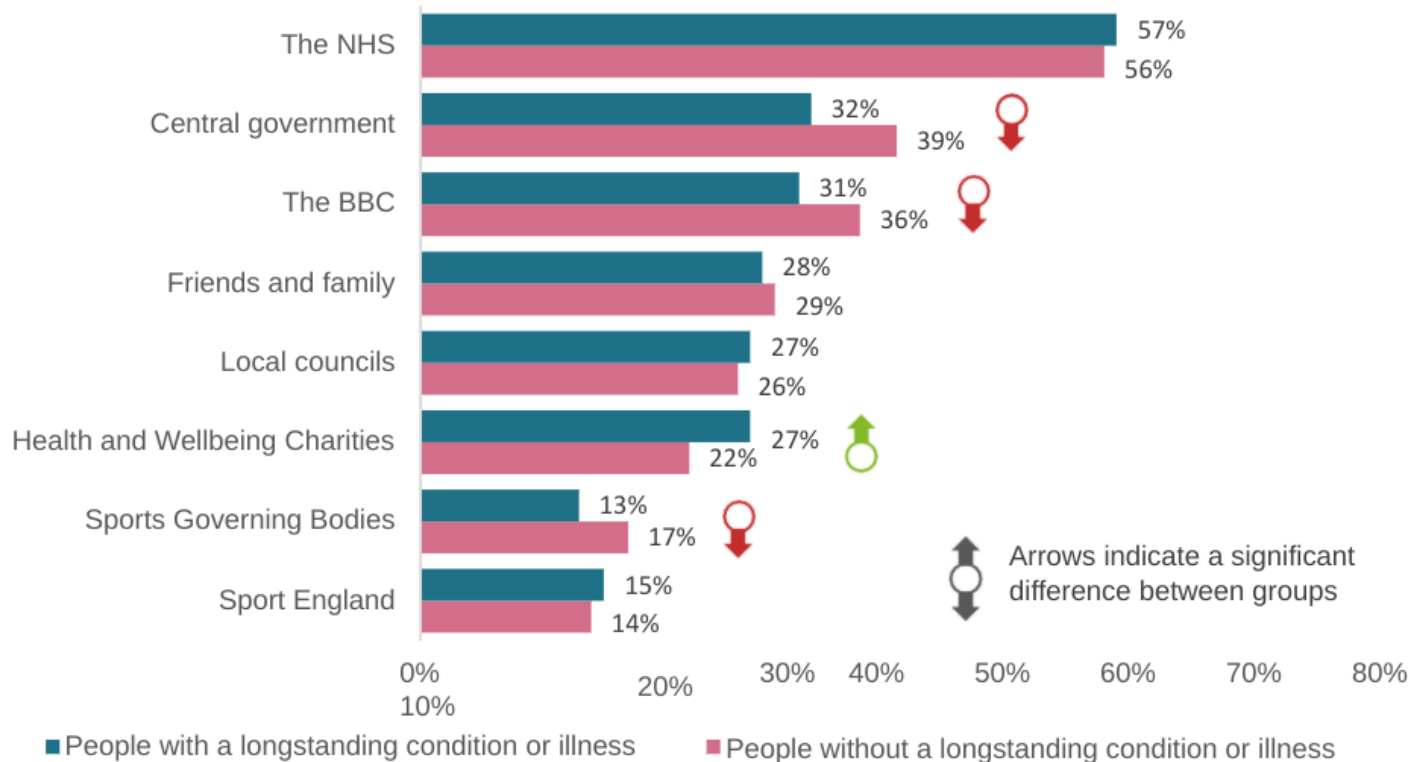
The single most important thing about physical activity.....is that there is no *single most* important thing

Slide courtesy of Dr Anna Lowe@annalowephysio

Long term conditions.....our population



% of adults ranking each source within the top 5 places they are most likely to look for trusted information and guidance on how to be active (from a prompted list)



Most frequently cited barriers to doing more physical activity amongst people with LTHCs (20th March – 7th April 2020)

1

My health issue causes pain

40%

2

I am worried about Coronavirus

38%

3

I am too tired / don't have enough energy

32%

4

My long-term condition is unpredictable / makes it hard to commit to a routine

29%

5


I am worried about making my health condition worse

20%

It's not just the physical, it's the perceived barrier busting/
handling objections helping people to see a way through. They
aren't alone



People with LTHCs want **practical, tangible, accessible** solutions



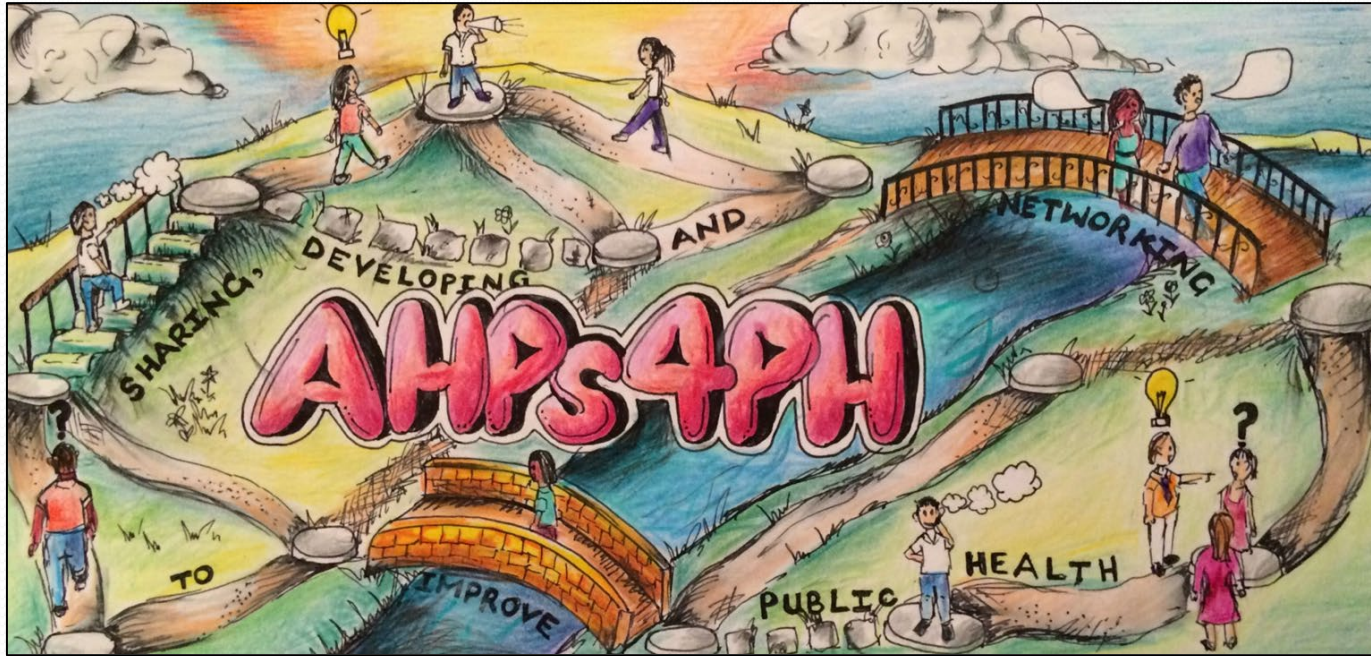
Calm contentment is the new happy. Portray mood as positive, but not too upbeat



Emphasise **routine building**



Emphasise **mental health and wellbeing**



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References and useful links

<https://www.gov.uk/government/publications/covid-19-mental-health-and-wellbeing-surveillance-report/2-important-findings-so-far>

<https://www.england.nhs.uk/wp-content/uploads/2020/10/00159-advancing-mental-health-equalities-strategy.pdf>

[https://www.stonewall.org.uk/system/files/lgbt in britain - trans report final.pdf](https://www.stonewall.org.uk/system/files/lgbt_in_britain_-_trans_report_final.pdf)

<https://www.stonewall.org.uk/lgbt-britain-health>

<https://www.rcn.org.uk/clinical-topics/public-health/inclusion-health-care>

People who identify as LGBTQ+ can experience assumptions, discomfort, some discrimination, and a lack of knowledge while attending physiotherapy : a survey. (Australian) Journal of Physiotherapy 65 (2019) 99-105 Ross & Setchell

Public Health data

<https://www.gov.uk/government/collections/wider-determinants-of-health>

<https://www.gov.uk/government/collections/local-health-public-health-data-and-mapping-tool-for-small-areas>

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