

Resetting Our Wellbeing

A reflection on Coventry's level of wellbeing in
2019/20 and our approach to improving it

Director of Public Health's Annual Report 2019-2020

Liz Gaulton

Director of Public Health and Wellbeing
Coventry City Council

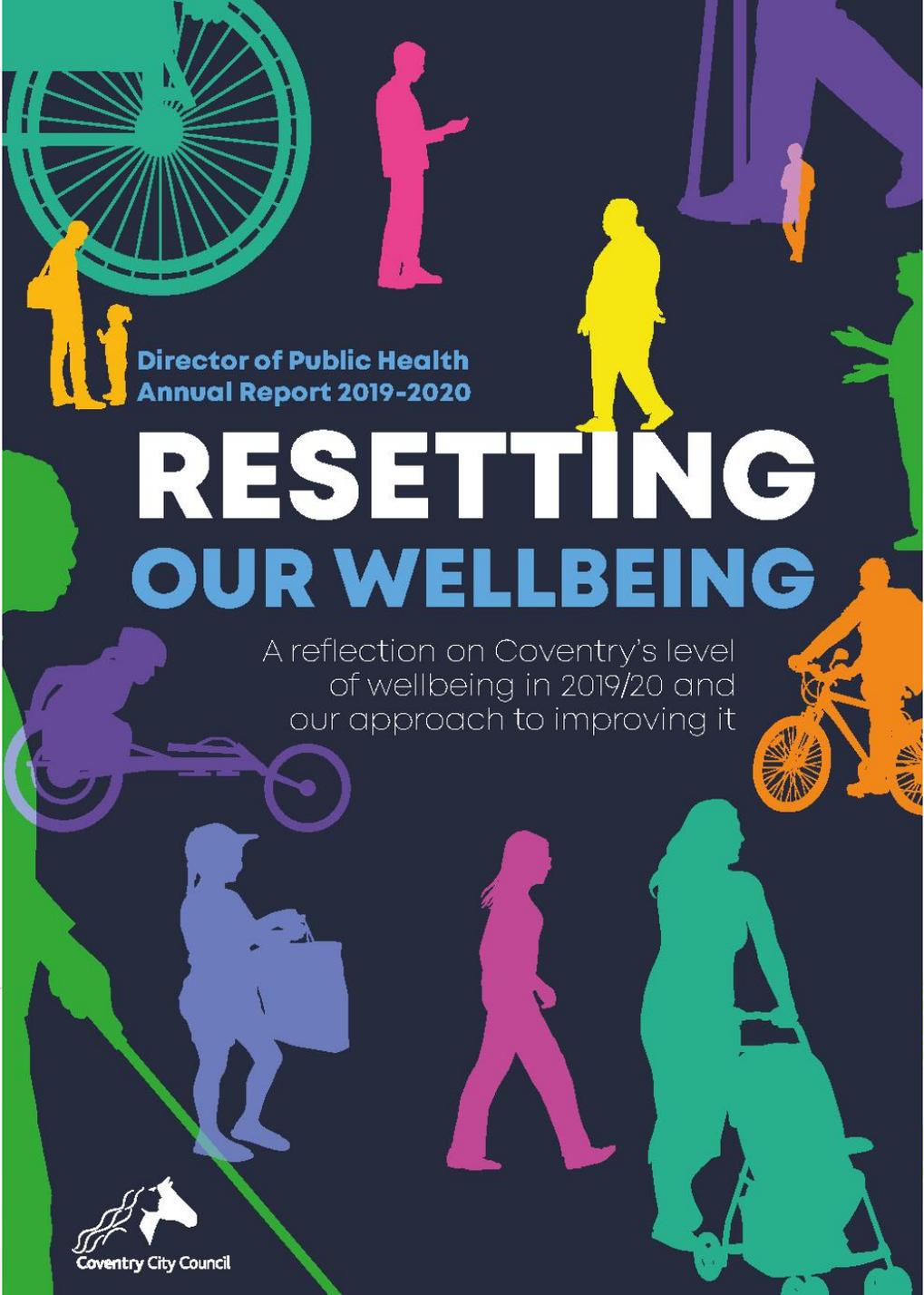
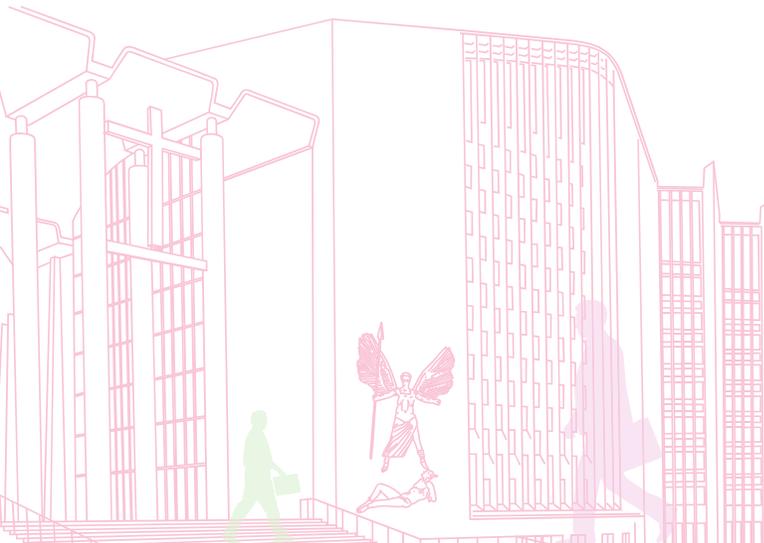
11 November 2020



Director of Public Health
Annual Report 2019-2020

RESETTING OUR WELLBEING

A reflection on Coventry's level
of wellbeing in 2019/20 and
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Report outline



Record of Coventry's level of wellbeing in 2019/20

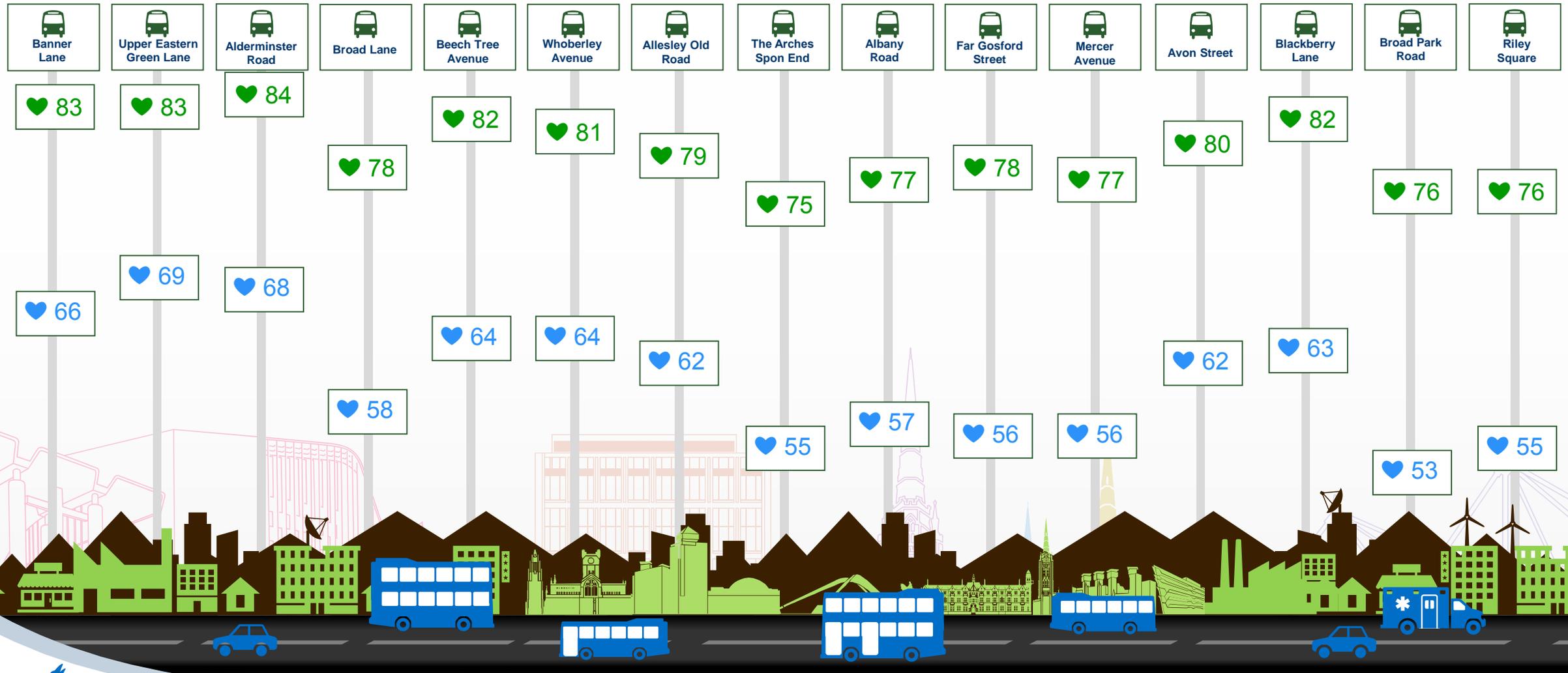
[Explore the data in Power BI](#)

Reflection on Coventry's approach to improving wellbeing last year and in our early COVID-19 response

Life expectancy vs Healthy life expectancy at birth for Coventry residents 2009-2013

Coventry's former bus route 10 crosses the city's more affluent and more deprived neighbourhoods. It helps to illustrate the stark differences in life expectancy and healthy life expectancy across the city.

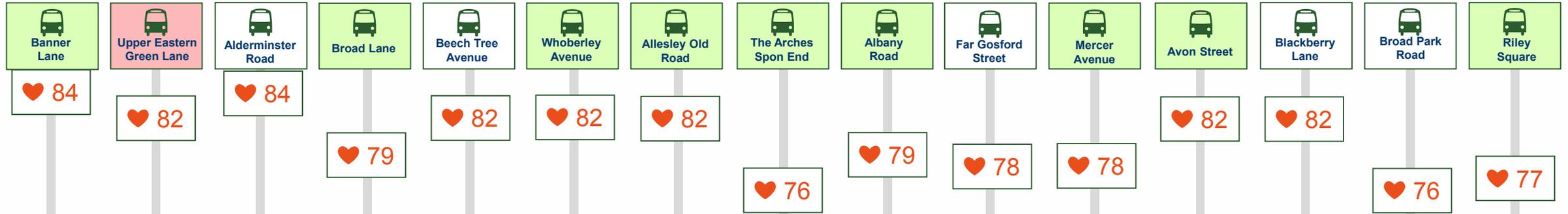
Updated 18 August 2020



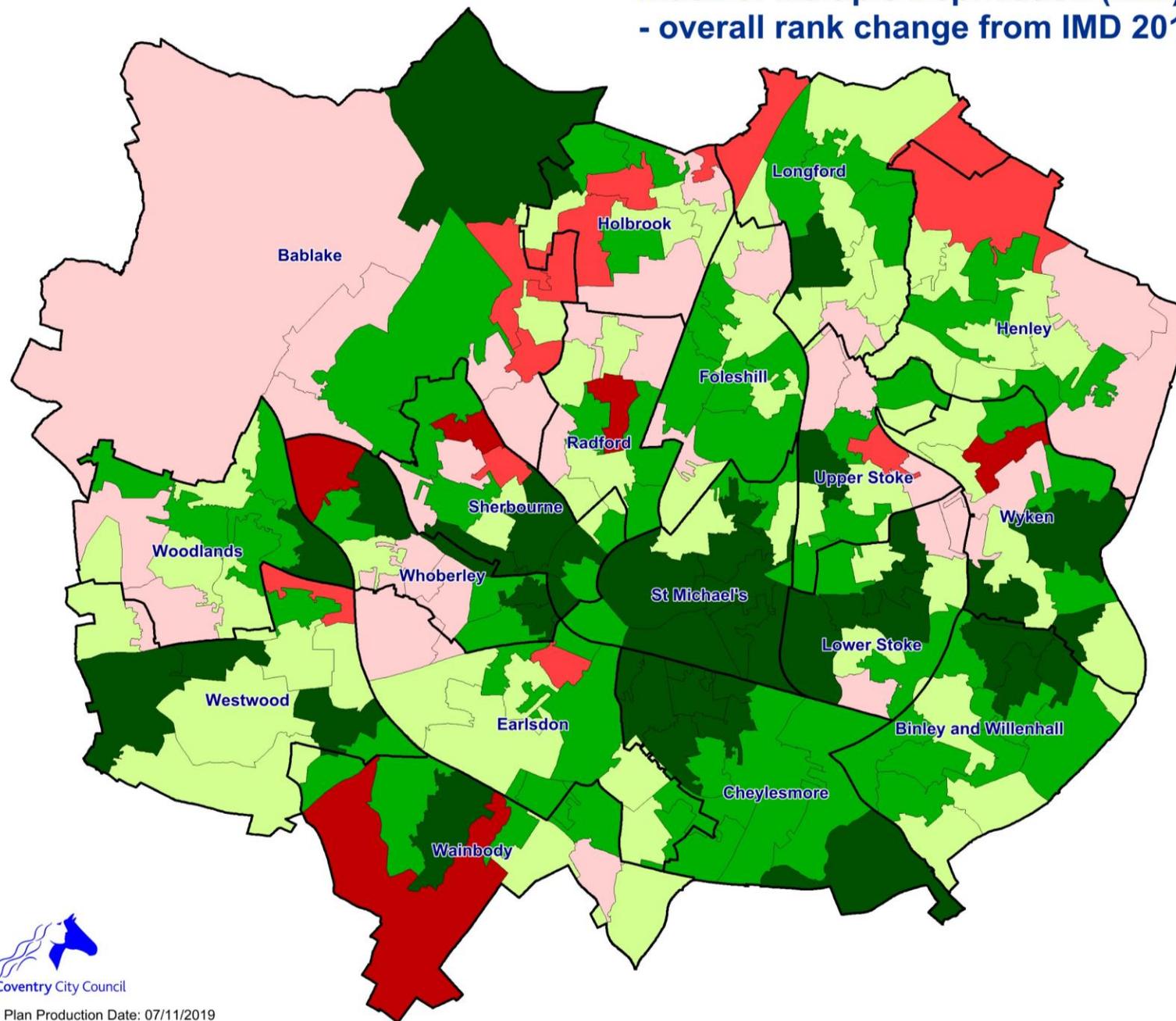
Life expectancy at birth for Coventry residents 2013-2017

Coventry's former bus route 10 crosses the city's more affluent and more deprived neighbourhoods. It helps to illustrate the stark differences in life expectancy and healthy life expectancy across the city.

Updated 16 October 2020



Index of Multiple Deprivation (IMD) 2019 - overall rank change from IMD 2015



KEY

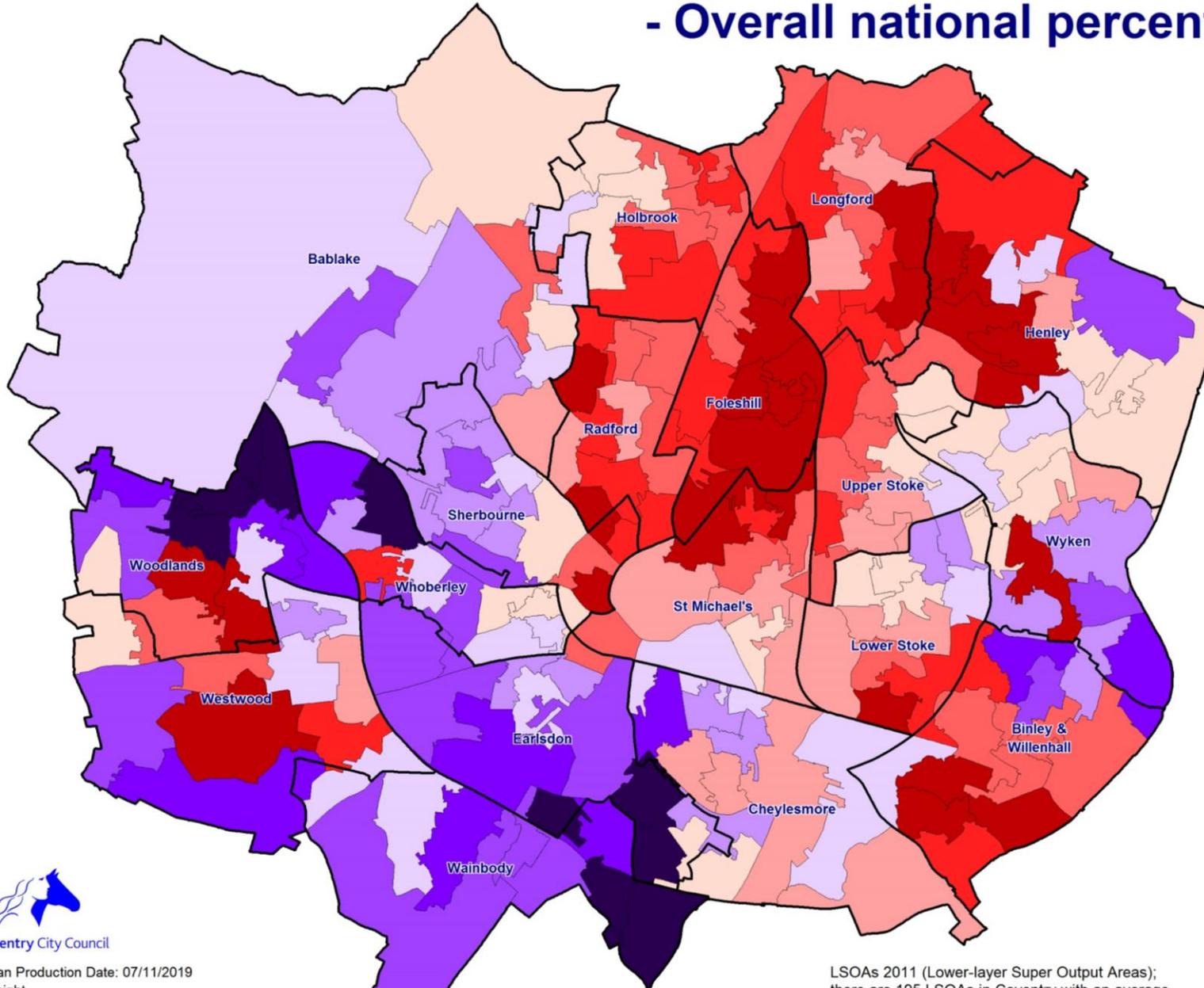
- Fallen by over 2,000 ranks**
(5 LSOAs)
- Fallen by between 1,000 and 2,000 ranks** (11 LSOAs)
- Fallen by between 0 and 1,000 ranks** (30 LSOAs)
- Risen by between 0 and 1,000 ranks** (35 LSOAs)
- Risen by between 1,000 and 2,000 ranks** (59 LSOAs)
- Risen by over 2,000 ranks** (35 LSOAs)

'Fallen' means that an LSOA has become relatively more deprived

'Risen' means that an LSOA has become relatively less deprived

INDEX OF MULTIPLE DEPRIVATION 2019

- Overall national percentage



Decile

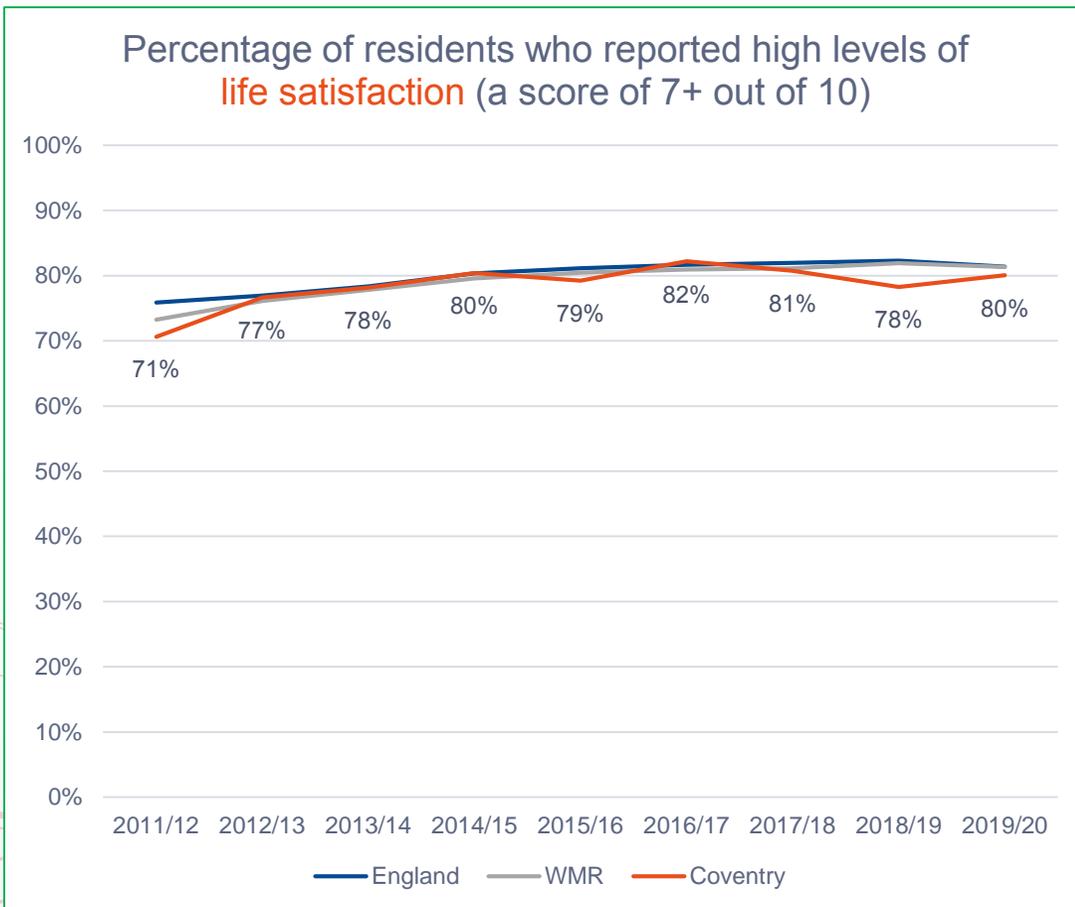
Nationally LSOAs lie in:

Most deprived

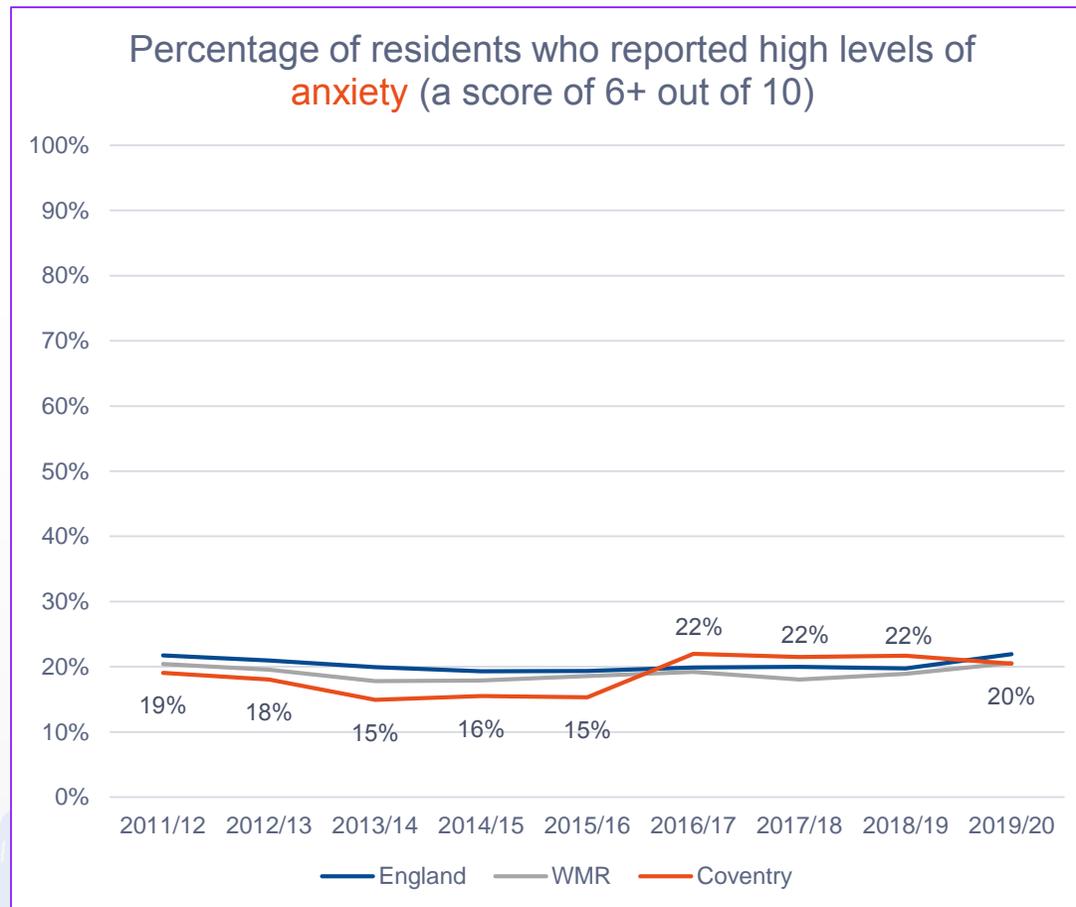
	0 to 9.9% 28 LSOAs
	10.0 to 19.9% 22 LSOAs
	20 to 29.9% 28 LSOAs
	30 to 39.9% 19 LSOAs
	40 to 49.9% 23 LSOAs
	50 to 59.9% 21 LSOAs
	60 to 69.9% 19 LSOAs
	70 to 79.9% 15 LSOAs
	80 to 89.9% 11 LSOAs
	90 to 100% 9 LSOAs

Least deprived

‘Overall, how satisfied are you with your life nowadays?’



‘Overall, how anxious did you feel yesterday?’

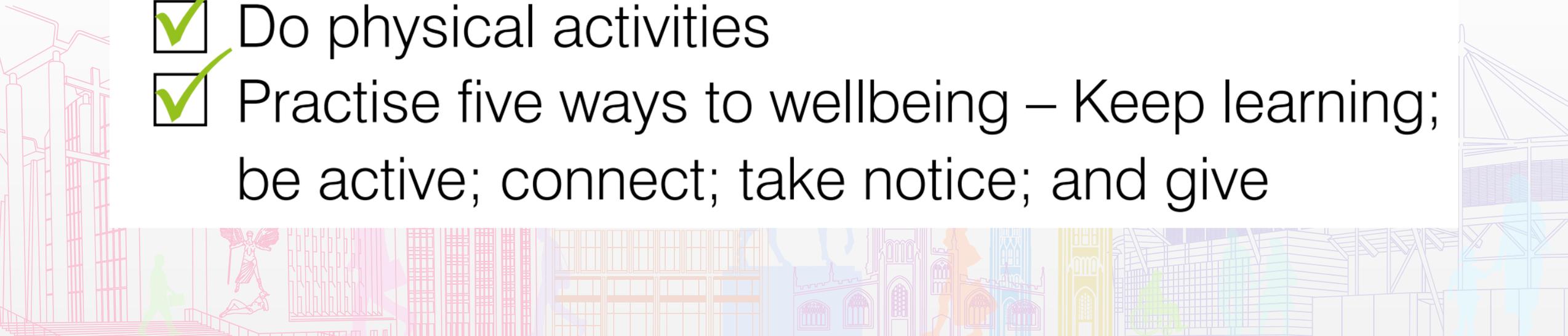


<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets/headlineestimatesofpersonalwellbeing>

Comparisons between areas must be done so with caution as these estimates are provided from a sample survey. Sampling variability should be taken into account when assessing differences between areas, as true differences may not exist.

What can we, as **individuals**, do to improve our wellbeing?

- Have vaccinations
- Have the flu vaccination
- Eat healthily
- Travel by walking or cycling
- Do physical activities
- Practise five ways to wellbeing – Keep learning; be active; connect; take notice; and give

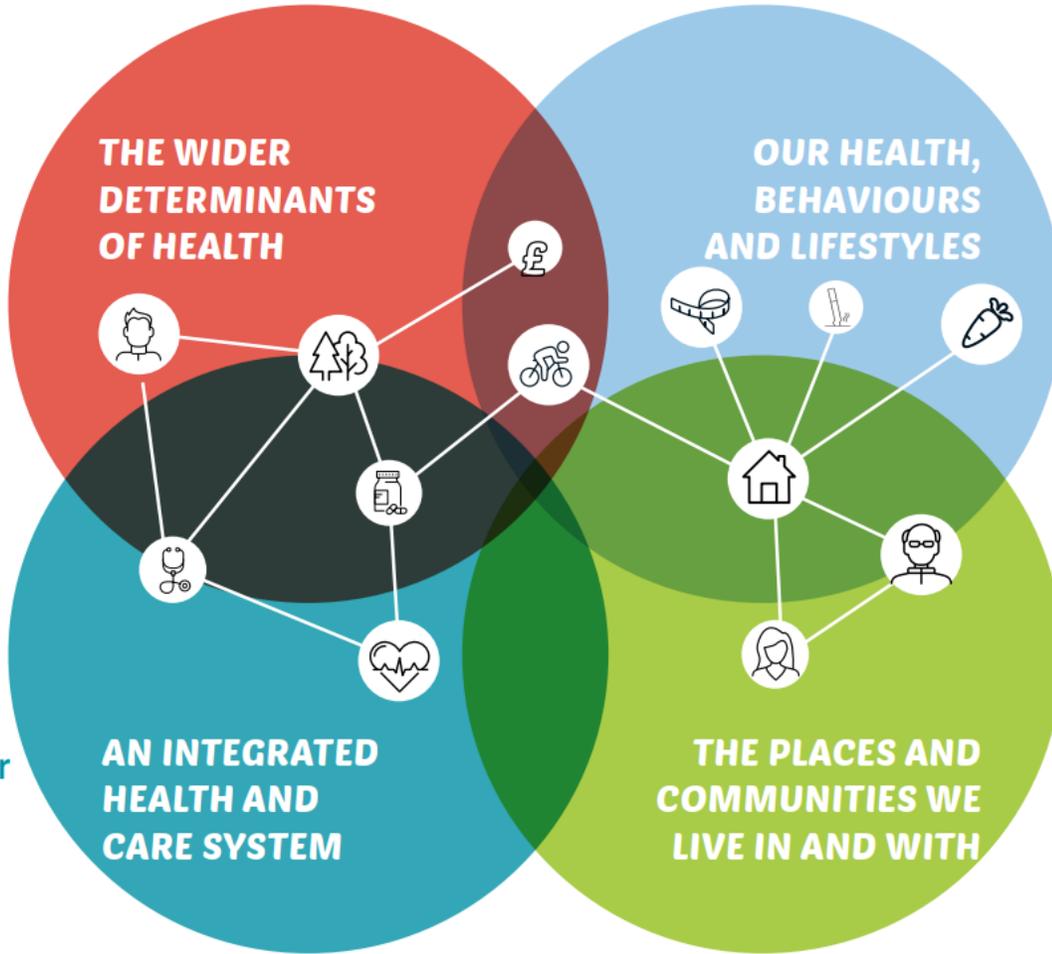


What did we, as **organisations and a system**, learn about Coventry's approach to improving wellbeing?

OUR POPULATION HEALTH FRAMEWORK

Embedding the Marmot city approach by working in partnership to tackle health inequalities

Health and social care commissioners and providers working together to commission and deliver services in Coventry

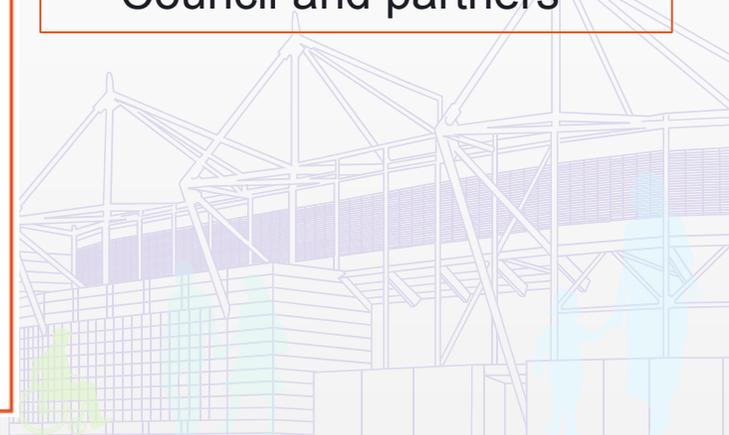


Aligning and coordinating the prevention programmes across the system to maximise impact and tackle barriers to healthy lifestyle choices

Working together in our places and with our communities to mobilise solutions informed by our understanding of local assets from place-based JSNAs

Informed by:

- **Interviews** with 20+ colleagues across teams and organisations
- **Performance reports and evaluations** from the Council and partners



What can we, as **organisations and a system**, do to improve our residents' wellbeing during COVID-19?

WIDER DETERMINANTS OF HEALTH

FINDING

More partners in the system now have a better understanding of health inequalities and are willing to consider it in their work

Health champions and the Migration app were effective in spreading health messages to BAME communities and new migrant groups. Early COVID responses show success with collaboration with faith groups

Employment inequality was addressed through specialist support for residents and influencing employers to improve recruitment practice

RECOMMENDATION 1

COVID-19 has shone a light on inequalities within our communities. Coventry City Council and partners should continue to build on this increased awareness, and consider the findings from COVID-19-related research and surveys, to mitigate the health and wellbeing impact of inequalities in Coventry.

What can we, as **organisations and a system**, do to improve our residents' wellbeing during COVID-19?

OUR HEALTH, BEHAVIOURS AND LIFESTYLE

FINDING

Effective methods of engagement and awareness raising were explored through the Year of Wellbeing campaign, JSNA workshops, our work with community messengers, and Grapevine's initiatives

FINDING

Year of Wellbeing encouraged organisations to build workforce resilience

RECOMMENDATION 2

Coventry City Council's approach to public health communications and engagement should be guided by lessons learnt and new relationships formed, especially as we continue to live with, and through, COVID-19.

RECOMMENDATION 3

Coventry City Council and partners should continue to encourage local employers, and lifestyle and wellbeing services, to commit to improving workplace wellbeing.

What can we, as **organisations and a system**, do to improve our residents' wellbeing during COVID-19?

INTEGRATION OF ACTIONS FROM THE COMMUNITY, PUBLIC SECTOR, AND VOLUNTARY SECTOR

FINDING

Many aspects of Public Health work have become more integrated and effective through partnership working. The benefits from this approach were especially evident during COVID-19. This model has been adopted in areas such as:

- Domestic abuse services;
- Mental health services;
- Parenting and early help;
- Homelessness;
- Healthy lifestyles;
- Tuberculosis treatment; and
- Childhood and flu vaccination

RECOMMENDATION 4

Building on existing health and wellbeing infrastructure, a collaborative partnership approach, which brings together residents' experience and partners' skills and assets, should be taken to strengthen health and wellbeing in communities.

What can we, as **organisations and a system**, do to improve our residents' wellbeing during COVID-19?

THE PLACES AND COMMUNITIES WE LIVE IN AND WITH

FINDING

During COVID-19, place-based groups shared resources and intelligence to provide food relief and spread public health messages

New methods of consultation and engagement enabled residents to make informed decisions about their communities and start movements to address issues that mattered to them

Before and during COVID-19, activities from local organisations and the Council helped to alleviate loneliness and build community cohesion. Operation Shield has further identified socially isolated individuals

RECOMMENDATION 5

Coventry City Council and partners should set up spaces and channels to meet with residents, with the aim of inspiring them to imagine the change they wish to see in their communities, and enabling residents to lead the change.



Thank you

