

Wider determinants of health – what does this really mean to the people we speak to?

Priority 3 of the Health and Wellbeing Strategy is:

‘Supporting those of all ages (babies, children, young people, adults and older adults) in the Priority Populations to reach their potential by addressing the wider determinants of health’.

We regularly speak to people who experience and share with us how these wider determinants have a real impact on their lives and impact on their ability to address their health and wellbeing.

People rarely experience health and social care needs in isolation. Their ability to access support, manage their wellbeing, recover, care for others, stay active, attend appointments, make healthy choices or feel safe is shaped by the conditions of daily life.

People we hear from and the experiences provided here highlight that health inequalities are not only about access to clinical care; they are also about housing, money, safety, education, social isolation, transport, confidence, trust, caring responsibilities and people’s ability to navigate complex systems.

Loneliness and isolation

Being lonely and socially isolated can also impact people’s health and create barriers to addressing physical health needs.



“Basically, that's all I've ever known, how I've ever coped with my emotions is through drug use and blocking things out. I've got myself, a lot of work to do with regards to my mental state.”

Another person described isolation as directly linked to risk:

"I spend a lot of time on my own now. The crimes I have committed have always been after I spent all my money on drugs and then sat not talking to anyone."

People who are carers, including young carers, can also experience isolation and loneliness, which in turn has an impact on their mental health:

"I'm still looking after mum and dad at home. Things have got worse, and I'm having to do a lot more now... I am not coping well... I am struggling. I feel alone and overwhelmed. I'm very stressed."

However, people also attribute family life to their current sense of wellbeing.

"I spend time with my children [to support my wellbeing]. Apart from the pleasure it gives me it also gives an incredible sense of purpose."

Finances



For some, caring has a direct impact on income and employment and in turn impacted wellbeing or future plans:

"I was self-employed and had my own business, but I had to give it up to home school my son and do all the admin to get him into a specialist school. My husband is also self-employed and money is tight now."

"I haven't told college about being a young carer. I'm not registered with Surrey Young Carers either. A fair future for me would be the opportunity to get a degree, but without the money and time to do it, it's impossible."

People often know what would help their health but cannot always act because of cost, time, transport, caring responsibilities or lack of suitable local options.

Prevention needs to be realistic for people's lives.

Our Helpdesk heard from a man who had lost his dentures and could not eat solid food. He was a pensioner and unpaid carer for his wife and

daughter, both of whom had terminal cancer. He could not afford private dental care or travel far, and the family were also struggling with the cost of living and were not receiving carers' support.

People also described barriers to physical activity:

"I need to do water aerobics but I'm too scared to go alone and it will cost too much."

Other responsibilities

In addition, carers and those with families linked lack of capacity to time, guilt and emotion:

"More time to actually do things for myself... sometimes you would like to say that this is my life too... But if you do, you have guilt because you are not looking after the people you care for."

"[I feel] I shouldn't spend time enjoying myself if there are things that still need doing. By the time I sit down of an evening the last thing I want to do is go somewhere."

"In reality, my mental wellbeing is strongly affected by my family, so they need to be happy for me to have permission to be happy. When money is tight and kids are working through neurodiversity, this is something that is a lot to ask for."

Environment

People affected by substance use told us that recovery is closely linked to their living environment, relationships, mental health and trust in services.



"I've had some issues in the past but I'm doing okay at the moment. I think getting my own place will help because there are still a lot of people that I live with who are weed smokers."

Another person described how trust in a worker helped them re-engage with support after a difficult period:

"I was already working with i-access but after my community sentence my world exploded, it was chaotic. I was given an ATR as part of the sentence. It hadn't gone well between me and my i-access key worker due to me getting arrested, I missed loads of appointment because of it. I emailed i-access to request a new key worker. My new key worker, I trust her, I found her non-judgmental, she has worked in mental health. I am on the waiting list for the abstinence preparation group at i-access."

System complexity



People also described forms, pathways, eligibility criteria and appointments as difficult to understand and navigate. Complexity can particularly affect people with caring responsibilities, low confidence, limited resources, poor previous experiences or multiple pressures in their lives and often results in people not engaging with services or getting the support they are entitled to.

"Everything to do with caring is just so complicated... It's a minefield. Take completing the attendance allowance forms. My mum wouldn't have been able to complete these. As for the CHC (Continuing Healthcare) for my dad, she wouldn't have had a clue. There are so many barriers, and everything is so complicated. She is elderly and if it wasn't for me, I don't know what she would have done. Even I found the forms complicated and they took a long time to fill out."

"I can't use a computer so online is out and I don't do it in person as I have to make an appointment and then come back again, and it takes an hour by bus."

Previous experiences

People's willingness to seek care is shaped by previous experiences. A poor interaction can reduce confidence and stop people from accessing support again.

In relation to screening, one person said:

"[I've not been to screening] recently because of a previous encounter with an unkind, uncaring and abrupt member of staff."

The importance of dignity and reasonable adjustments was also clear in hospital care:

"Attended A&E at the hospital with a suspected blood clot... Staff were not trained properly in how to lead a blind person and were not doing it correctly. A male nurse shoved me backwards into a wheelchair and shouted at me. Some staff were patronising and disrespectful... The experience left me feeling upset and vulnerable."

And our childhood experiences can have long term implications:

"My childhood experiences definitely affected me. Mum said, "You're getting grotesque". I wanted to do ballet and she said, "You're too fat". Those early messages about food led to binge eating."

The experiences shared through Luminus' work show that addressing wider determinants is practical, not abstract. People's ability to stay well is affected by whether they have safe housing, enough money, accessible services, trusted relationships, support with caring responsibilities and confidence to seek help.

