

# **Health Profile for Lambeth 2022**

## **Section 7 – Wider Determinants**

# Contents

Section 7 - Wider determinants

Version 1.1 - 19 August 2022

## Contents

<b>Findings</b> .....	3
<b>7.1 Introduction</b> .....	4
<b>7.2 Built and natural environment</b> .....	5
<b>7.2.1 Housing</b> .....	5
<b>7.2.2 Green spaces</b> .....	5
<b>7.3 Education</b> .....	6
<b>7.3.1 Reception</b> .....	6
<b>7.3.2 Key stage 4</b> .....	7
<b>7.4 Employment</b> .....	8
<b>7.4.1 Economic activity</b> .....	8
<b>7.5 Income</b> .....	10
<b>7.5.1 Average weekly earnings</b> .....	10
<b>7.5.2 Income deprivation</b> .....	10
<b>7.5.3 Children in low-income households</b> .....	10
<b>7.5.4 Food poverty</b> .....	11
<b>7.6 Communities and social capital</b> .....	12
<b>7.7 Appendix</b> .....	14

## Findings

**23.2 per 1,000 households at risk of homelessness**

4th highest rate in London and 6th highest rate in England in 2020/21

**80% working age people in employment in Lambeth**

2nd highest proportion in London

**15% of children living in low income households**

In 2019/20, this amounts to 8,832 children in absolute low-income families

**82.3% of households have access to open space**

This is the 6th highest out of London boroughs in 2015. Access varies greatly across the borough, however

**Children with free school meal status have lower attainment**

Seen across reception and key stage 4 in Lambeth but follows the national trend

**Community cohesion and safety fallen since pandemic**

In self-reported survey taken over 2020 throughout the pandemic have shown decrease since early 2020

## 7.1 Introduction

The wider determinants of health are a diverse range of social, economic, and environmental factors which impact on people's health. Inequalities in these factors, which can be influenced by local, national, and international policies, are an important driver of the inequalities in risk factors and health outcomes. They determine the extent to which different individuals have the physical, social, and personal resources to identify and achieve goals, meet their needs and deal with changes to their circumstances.

The link between social inequalities and disparities in health outcomes is strong and persistent<sup>1</sup>. Addressing the wider determinants of health will help improve health equity as well as overall health.

The Marmot Review<sup>1</sup>, published in 2010, raised the profile of wider determinants of health by presenting evidence of the link between inequity in deprivation and health outcomes. Addressing the wider determinants of health has a key role to play in reducing health inequalities.

The Marmot Review 10 Years On<sup>2</sup>, published in 2020, examined the progress made in addressing health inequalities in England and gave an updated list of recommendations to help reduce them. They also highlighted that in the 10 years between the two reports on average people can expect to spend more of their lives in poor health and that the health gap has grown between wealthy and deprived areas.

In this section we cover the following areas:

- Built and natural environment (Air pollution is covered in section 8)
- Education
- Employment
- Income
- Communities and social capital

These categories do not cover all the wider determinants of health but there is representation for each social, economic, and environmental factor of health so gives an overview of them.

## 7.2 Built and natural environment

The built and natural environment such as quality of air, green spaces, and housing, as well as ease of access and affordability, can affect health outcomes.

### 7.2.1 Housing

Poor housing has a negative effect on our physical and mental health, particularly for older people, children, disabled people, and individuals with long-term illnesses<sup>4</sup>. The private rented sector had the largest proportion of dwellings not meeting the standard at 23%, compared with 16% of owner-occupied homes and 12% of social rented homes<sup>5</sup>.

In Lambeth, an estimated 29.7% of households were privately rented dwellings in 2020 (equating to 43,300 households). This is the 8<sup>th</sup> highest proportion out of London boroughs. Overall, in London the proportion of privately rented houses was 24.4% and for the UK it was 17.2%<sup>6</sup>.

Furthermore, a survey done by Shelter during lockdown found that one in five renters (22%) in England reported that their housing problems were causing them ill health<sup>7</sup>.

Affordable housing is an important social determinant of health as can affect quality of housing available, poverty, community cohesion, and time spent commuting. Looking at the ratio of median house price to median gross annual residence-based earnings where a higher ratio indicates that, on average, it is less affordable for a resident to purchase a house in their local authority district. In 2021, Lambeth had a ratio of 13.8, which is the 18<sup>th</sup> highest compared to 32 London boroughs<sup>8</sup>. This ratio has increased steadily since 2002 when the ratio was 8.0.

Homelessness is associated with poor health, education, and social outcomes, particularly for children<sup>9</sup>. It often results from a combination of events such as relationship breakdown, debt, adverse experiences in childhood and through ill health. Using households owed a duty under the Homeless Reduction Act (HRA) – an act which brought new homelessness duties to household who are homeless or threatened with becoming homeless – Lambeth has a rate 23.2 of per 1,000 estimated total households in 2020/21. This is the 4<sup>th</sup> highest rate of households owed a homelessness duty out of the London boroughs and 6<sup>th</sup> overall in England<sup>10</sup>.

### 7.2.2 Green spaces

A report in 2020 shows that living in a greener environment can promote and protect good health<sup>11</sup>. This can range from improved physiological outcomes to better mental health and wellbeing, as well as promoting community cohesiveness and giving better protection from air pollution and flooding.

Out of all London boroughs in 2015, Lambeth has the 6<sup>th</sup> highest proportion of household access to open space at 82.3% of households<sup>12</sup>. Open spaces are defined as regional parks, metropolitan parks, district parks, local parks, small open spaces, pocket parks, and linear open spaces but exclude farmland and other types of green space outside of the public open space category definitions within the London Plan 2011. The maximum recommended distances vary by type. However, access across Lambeth varies quite a bit. In Streatham South and Herne Hill less than half the households have access to open space while 10 of the 21 boroughs have over 90% of households able to access open space.

### 7.3 Education

The amount and quality of education a person receives within their lifetime is strongly linked with health behaviours and outcomes.

Better-educated individuals are less likely to suffer from long term diseases, to report themselves in poor health, or to suffer from mental health conditions such as depression or anxiety<sup>13</sup>. Education provides knowledge and capabilities that contribute to mental, physical, and social wellbeing. Educational qualifications are also a determinant of an individual's labour market position, which in turn influences income, housing and other material resources associated with health.

#### 7.3.1 Reception

Children are assessed for 'school readiness' upon completion of the reception year in school at around 5 years of age. This is a key measure of early years development across a wide range of developmental areas. Further, children from poorer backgrounds are more at risk of poorer development and the evidence shows that differences by social background emerge early in life.

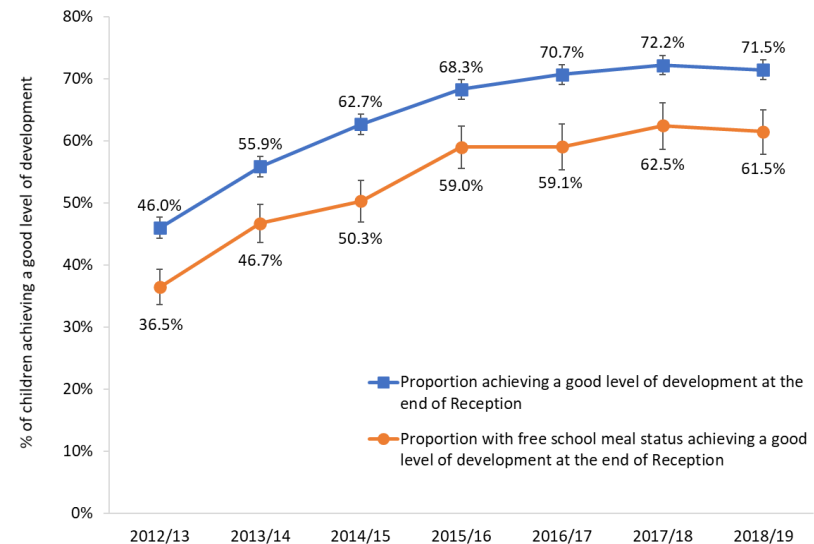
In 2018/19, 71.5% of all eligible children were said to be reaching a good level of development at the end of reception<sup>14</sup>. This is a very similar level to the average in England overall (71.8%) and has improved steadily from 2012/13 where it was 46.0%. However, it is lower than London's average attainment of 74.1%.

In comparison, the proportion of children with free school meal status achieving a good level of development at end of reception in 2018/19 was 61.5%. This is significantly lower than the proportion of all school

children, **figure 7.1**. Nevertheless, it is significantly higher than England's overall average of 56.5% but lower than London's average attainment of 64.1%.

This is the most recent data we have for early years as both the 2019-20 and 2020-21 early years foundation stage profile results were cancelled due to not being made mandatory to allow for pressures owing to the COVID19 pandemic.

**Figure 7.1: Percentage of children achieving a good level of development at end of Reception by overall and free school meal status in Lambeth**



Source: Office for Health Improvement & Disparities. Wider Determinants Health Profiles. <https://fingertips.phe.org.uk> © Crown copyright 2022

#### 7.3.2 Key stage 4

Attainment 8 measure the achievement of a pupil across 8 qualifications at the end of key stage 4. This is an important measure as it tells us how well children have done in their GCSE results and gives an idea of what qualifications people who leave school at this age have.

In 2020/21, Lambeth had an average attainment value of 53.1, which is significantly better than the England score at 50.9 but worse than the London average of 54.3<sup>14</sup>. Those eligible for free school meals scored slightly lower than the overall population in Lambeth. The average attainment value was 45.7<sup>15</sup>. Due to the recent changes in how GCSEs are graded and the COVID-19 pandemic disrupting exams, these results cannot be accurately compared to previous years.

Grade 4 is the level that students must achieve without needing to re-sit English and Maths post-16. Looking at the proportion of pupils achieving grade 4 in English and Mathematics GCSE'S in 2020/21, it is seen that 71.5% achieved this in Lambeth. This is lower than both London and England's values of 75.6% and 72.2% respectively<sup>15</sup>. Those eligible for free school in Lambeth meals had a lower proportion at 62.6%.

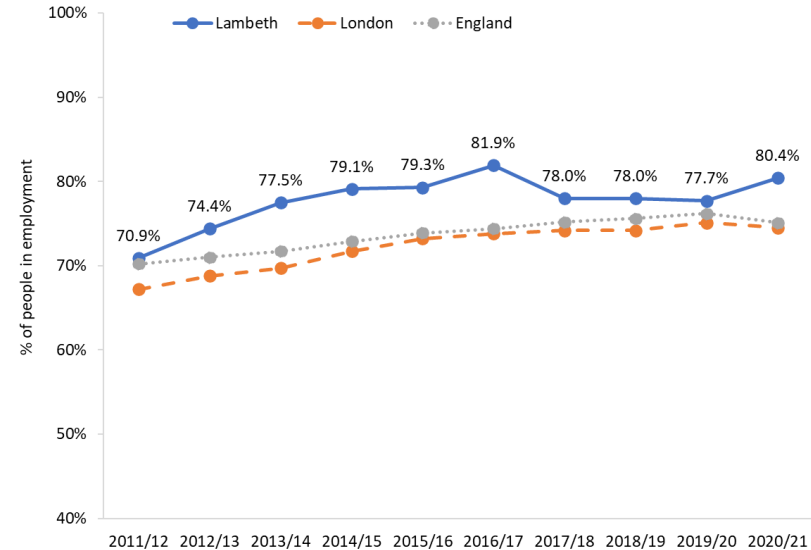
## 7.4 Employment

Good employment improves health and wellbeing across people's lives, boosting quality of life and protecting against social exclusion. The 2006 review "Is work good for your health and well-being?"<sup>16</sup> concluded that work is generally good for physical and mental health and well-being.

### 7.4.1 Economic activity

In 2020/21, 80.4% of 16-64 year olds were employed in Lambeth, significantly higher than both London and England's proportion at 74.5% and 75.1% respectively<sup>17</sup>. This is second highest proportion out of the 32 London boroughs not including City of London. This proportion has increased since 2011/12 when it was 70.9% employed in Lambeth, [figure 7.2](#).

Figure 7.2: Percentage of people in employment



Source: Office for Health Improvement & Disparities. Wider Determinants Health Profiles. <https://fingertips.phe.org.uk> © Crown copyright 2022

Comparing employment rate overall in Lambeth and that of ethnic minorities, we can see in [figure 7.3](#) that over the years that gap between the two employment rates has become much smaller. 2013/14 was the only year we saw a significant difference between the two rates, and it had the largest gap of 19.5%. Since then, employment rate for ethnic minorities in Lambeth has increased resulting in the percentage point gap being only 2.7% in 2020/21.



# Wider determinants

## Section 7 - Employment

Version 1.1 - 19 August 2022

Lambeth had the lowest economic inactivity out of all London boroughs in 2020/21 at 13.4%<sup>17</sup>. This is significantly lower than both London's and England's values of 20.5% and 20.9% respectively. The term economic inactive refers to 16-64 years old who are neither classed as employed or unemployed.

Groups comprising the economically inactive include: the long-term sick or disabled, the temporary sick (with no employment), people looking after family/home, students, and retired people. The individual level interventions that may improve the health outcomes of economically inactive people, including helping people back to work where appropriate are different to those for unemployed people.

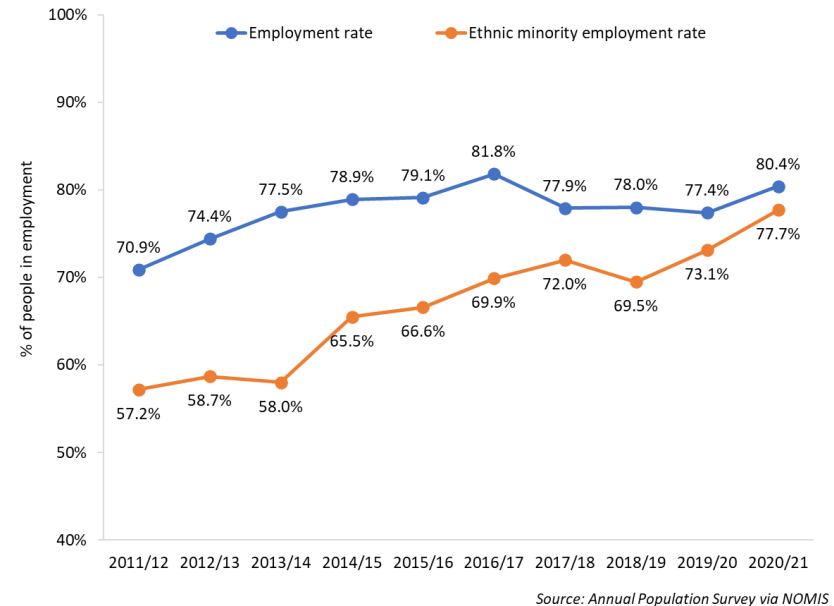
The gap in employment rate for those who are more vulnerable is measured by the percentage point gap between the percentage of respondents in the Labour Force Survey who are vulnerable who are classified as employed (aged 16-64) and the percentage of all respondents in the Labour Force Survey classed as employed (aged 16-64). The higher the value means there is a bigger difference in those being vulnerable employed and overall employment rate.

Looking at the gap for those with a long-term health condition, the value is at 14.3 in 2019/20<sup>17</sup>. The value hasn't changed significantly since 2013/14. It is also higher than both London and England's values at 11.5 and 10.6 respectively.

The gap for those with a learning disability and those with access to secondary mental health services is much higher however, at 76.1 and 73.7 respectively<sup>17</sup>. These are both significantly lower than England and London's values though those are high as well. The gap for those with a

learning disability has significantly increased since 2011/12 where it was 65.5.

**Figure 7.3: Employment rate in overall and ethnic minorities population in Lambeth by financial year in Lambeth**



## 7.5 Income

The Marmot review looking into the link between wider determinants and health found that many physical and mental health outcomes improve incrementally as income rises and that income is linked to life expectancy<sup>1</sup>. The relationship is linked through a variety of ways. Financial resources determine the extent to which a person can both invest in goods and services which improve health and purchase goods and services which are bad for health. Low income can also prevent active participation in social life and day to day activities, affecting feelings of self-worth and status<sup>18</sup>. It can also influence health through feelings of shame, low self-worth and exclusion<sup>19</sup>.

### 7.5.1 Average weekly earnings

Average Weekly Earnings indicator is designed to give insight into the variation of economic resources across areas and between subgroups (men and women, income decile). Financial resources can determine the extent to which a person can invest in goods and services which improve health, and purchase of goods and services which are actively bad for health.

In 2021, the average weekly earnings in Lambeth was £670.70. This is higher than the London average of £604.80 and was also the 8<sup>th</sup> highest out of the London boroughs. Between 2016 and 2018 saw a significant rise for average weekly earnings in Lambeth, going for £537.70 and £611.70. Since 2018 there has been a slower incline.

### 7.5.2 Income deprivation

Income Deprivation measures the proportion of the population in an area experiencing deprivation relating to low income. The definition of low income used includes both those people that are out-of-work, and those that are in work but who have low earnings (and who satisfy the respective means tests).

In 2019 in Lambeth, 15.3% were living in income deprivation. This is significantly higher than the overall England value of 12.9% and ranks the 12<sup>th</sup> highest proportion out of all the London boroughs.

### 7.5.3 Children in low-income households

Absolute and relative low income is defined as a family in low income before housing costs in the reference year in comparison with incomes in 2010/11. A family must have claimed one or more of Universal Credit, Tax Credits or Housing Benefit at any point in the year to be classed as low income in these statistics. Absolute low income takes the 60 per cent of median income threshold from 2010/11 and then fixes this in real terms (i.e., the line moves with inflation). Relative low income sets a threshold as 60% of the UK average (median) income and moves each year as average income changes.

The proportion of children in absolute low-income families and those in relative low-income families in 2019/20 have both significantly increased since the previous year at 15.5% and 19.7% respectively.

#### 7.5.4 Food poverty

In 'Measuring Food Poverty and Security' Survey<sup>20</sup>, it was found that almost 1 in 3 people in Lambeth experience food poverty. Food poverty is the inability of individuals and households to secure an adequate and nutritious diet, thereby affecting their health.

Furthermore:

- 24% said it was sometimes or often true they couldn't afford to eat balanced meals.
- 14% had experienced very low food security - there were times in the past year that someone in their household cut the size of their food or skipped meals as there wasn't enough money for food.
- 11% said there were times in the past year that someone in their household had eaten less than they felt they should as there wasn't enough money for food.
- 9% said there were times in the past year that they were hungry but didn't eat as there wasn't enough money for food.
- 81% said improving their health and wellbeing was important to them.
- 79% thought food poverty and insecurity is a significant issue in Lambeth and of those 43% said a very big issue

Overall, this section shows that while average weekly earnings in Lambeth may be increasing the proportion living with relatively low incomes is also increasing – cost of living is going up faster than wages.

### 7.6 Communities and social capital

Lambeth Council believes that wellbeing is higher amongst those who have regular contact with their neighbours, and that knowing people in the local area can have a big impact on how safe and secure residents feel and their sense of belonging to where they live. People are less isolated and have an additional support system, alongside their family and friends. Schemes such as Lambeth Street Champions and Community Freshview are designed to bring communities together and lead to a more resilient borough.

However, the pandemic seems to have had a negative effect upon Lambeth's sense of community, as listed below:

- The majority of residents feel within their communities' residents get on well together (84%) in March 2022, but this has fallen since Feb 2020 (94%)<sup>21</sup>. The lowest proportion reported is in Stockwell (76%) and highest in Waterloo (97%).
- The proportion who feel like they could ask a neighbour for advice has fallen significantly from 71% in Feb 2020 to 45% in March 2020<sup>21</sup> – seen in [figure 7.3](#). Furthermore, those who have a disability or rent from a housing association or the council are less likely to agree.
- Feelings of safety from crime when walking around the local area during the day fell from 97% in Jan/Feb 20 to 86% in March 22<sup>21</sup>. Females and those with a disability are significantly less likely to report feelings of safety.
- When asked around feeling safe walking in the local area in the evening fell by 16% since Jan/Feb 20, reaching 54% feeling safe in evening in March 22<sup>21</sup>. Females and those with a disability are significantly less likely to report feelings of safety.

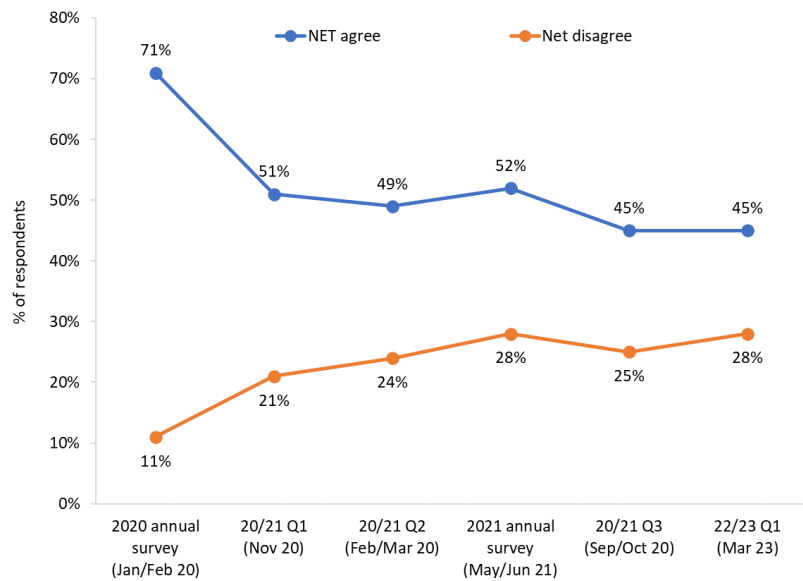
# Wider determinants

## Section 7 - Communities and social capital

Version 1.1 - 19 August 2022

In 2019/20, less than half of social care users had as much social contact as they would like (41.6%)<sup>22</sup>. This is lower than the average for both London and England, 42.6% and 45.9% respectively. Neither of these differences are significant, however. The proportion in Lambeth has slowly been increasing since 2010/11 where it was 36.8%, but the change is not significant.

**Figure 7.6 Proportion of residents responding to the question ‘Please say how strongly you agree or disagree that if you needed advice about something you could go to someone in your neighbourhood?’ over time**



Source: Lambeth residents survey

## 7.7 Appendix

1. <https://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>
2. <https://www.instituteofhealthequity.org/resources-reports/marmot-review-10-years-on>
3. <https://fingertips.phe.org.uk/profile/wider-determinants/data#page/3/gid/1938133043/pat/6/par/E12000007/ati/402/are/E09000022/iid/93867/age/-1/sex/-1/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1/page-options/car-do-0>
4. [https://assets.ctfassets.net/6sxvmndnnp0s/6pmYen0M6fWEJCCKqEq5sY/95d09421aeeec22dcc37c6cd202fc5bc/People\\_living\\_in\\_bad\\_housing.pdf](https://assets.ctfassets.net/6sxvmndnnp0s/6pmYen0M6fWEJCCKqEq5sY/95d09421aeeec22dcc37c6cd202fc5bc/People_living_in_bad_housing.pdf)
5. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/945013/2019-20\\_EHS\\_Headline\\_Report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/945013/2019-20_EHS_Headline_Report.pdf)
6. <https://data.london.gov.uk/dataset/housing-tenure-borough>
7. [https://england.shelter.org.uk/media/press\\_release/health\\_of\\_one\\_in\\_five\\_renters\\_harmed\\_by\\_their\\_home](https://england.shelter.org.uk/media/press_release/health_of_one_in_five_renters_harmed_by_their_home)
8. <https://fingertips.phe.org.uk/profile/wider-determinants/data#page/3/gid/1938133043/pat/6/par/E12000007/ati/402/are/E09000022/iid/93111/age/1/sex/4/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1/page-options/car-do-0>
9. <https://www.local.gov.uk/impact-health-homelessness-guide-local-authorities>
10. <https://fingertips.phe.org.uk/search/homelessness#page/3/gid/1000041/pat/6/par/E12000007/ati/402/are/E09000022/iid/93736/age/-1/sex/-1/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1/page-options/car-do-0>
11. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/904439/Improving\\_access\\_to\\_greenpace\\_2020\\_review.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/904439/Improving_access_to_greenpace_2020_review.pdf)
12. <https://data.london.gov.uk/dataset/access-public-open-space-and-nature-ward>
13. <https://www.nber.org/papers/w12352>
14. <https://fingertips.phe.org.uk/profile/wider-determinants/data#page/1/gid/1938133071/pat/6/par/E12000007/ati/402/are/E09000022/iid/90631/age/34/sex/4/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1/page-options/car-do-0>
15. Department of Education open source data
16. <https://www.gov.uk/government/publications/is-work-good-for-your-health-and-well-being>
17. <https://fingertips.phe.org.uk/profile/wider-determinants/data#page/1/gid/1938133042/pat/6/par/E12000007/ati/402/are/E09000022/iid/92899/age/204/sex/4/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1/page-options/car-do-0>

18. Anand S FP, Amartya S,. Public health, ethics, and equity. Oxford: Oxford University Press; 2014.
19. <https://www.gov.uk/government/publications/psychosocial-pathways-and-health-outcomes>
20. Measuring food poverty and security, Lambeth survey
21. Lambeth Residents Survey
22. <https://fingertips.phe.org.uk/profile/wider-determinants/data#page/1/gid/1938133044/pat/6/par/E12000007/ati/402/are/E09000022/yrr/3/cid/4/tbm/1>