

BABERGH & MID SUFFOLK DISTRICT COUNCILS

WELLBEING STRATEGY

2021-2027



Wellbeing Strategy 2021 -2027

Our Vision:

'The residents of Babergh and Mid Suffolk will have the best possible conditions for good wellbeing and have lives that are healthy, happy and rewarding.'

Contents

Introduction	4
The Framework for this Strategy	5
Defining Wellbeing	5
Our Strategic Vision for Well-Being	7
A summary of the key local well-being issues at this point	7
Our Approach	9
What does our Wellbeing Strategy aim to achieve?	10
Our long-term outcomes to 2027	10
Our short to medium term outcomes	10
Our Objectives to Support the Short to Medium Term Outcomes	11
Working in Partnership	14
What do we know from local data and national research about the impact of Covid on Wellbeing of o Communities?	
What does the Office of National Statistics tell us about Wellbeing in our Districts according to the M	
of National Wellbeing?	17
Personal Wellbeing	17
Our Relationships	17
Health	17
What we do	18
Where we live	18
Making it happen	18
Measuring and reporting on progress	199
Appendices & footnotes	20

Foreword

People could be forgiven for not immediately recognising the significance of our Councils' role in promoting the wellbeing of communities. When we think about wellbeing the natural tendency is to focus on the type of health interventions that diagnose and treat illnesses and the public health messages that promote healthy lifestyle choices so we can all remain fit and independent for as long as possible.

The connections between our health and our wellbeing are well established. Making people feel optimistic, connected and happy is heavily influenced by other things; their home, the environment in which they live, their job and training prospects, the schools their children attend and how they can influence the things which really matter to them.

We believe, as your Council, that we should proactively configure the services we provide, and how we provide them, to optimise our impact upon these broader determinants of health and wellbeing. We have an opportunity to have more of a wellbeing impact in everything we do.

Some of our activities, such as housing those who are rough sleeping or homelessness, have an obvious positive wellbeing impact on our residents' lives, but we believe we can go further in everything we do. This strategy, therefore, offers us the chance to ensure we have a more comprehensive, pro-active, and connected approach.

The development of our Wellbeing Strategy has taken place in the shadow of Covid-19. This national emergency has caused anxiety and uncertainty across our communities. However, through this difficult time we have witnessed the determination, resilience and adaptability of our communities, residents, volunteers, partners and our own organisation. We have been overwhelmed, but not surprised, by the continued willingness and generosity of people of all ages and backgrounds to give their time and expertise as volunteers.

Our approach as your Council has also changed in response to the pandemic - supporting our communities and the local economy in novel ways, and planning for a swift recovery so that our districts can bounce back fully and continue to thrive. The wellbeing of our residents, communities and businesses will be key to this recovery.

We have listened to our partners, our Councillors, and staff from across the Councils to identify our wellbeing objectives and what we need to do to achieve them.

The long-term ambition and focus of this strategy is to enable families to lead active, healthy, safe and independent lives and manage their own health & wellbeing; to create sustainable places and spaces which maximise health and wellbeing opportunities and for health inequalities to be reduced.

Our aim is to do everything we can to stimulate and enhance the social, economic, environmental, and cultural wellbeing of our communities and this will be achieved not only through this strategy, but by ensuring that well-being also continues to be embedded in the delivery of the strategies that support the Councils' five other strategic priorities.



Cllr Harry Richardson, Mid Suffolk Cabinet Member for Health & Wellbeing





Introduction

The Strategy has been developed through discussions and workshops with Councillors, key internal officers, and many of our partner organisations in the public, health and voluntary sector, recognising the additional impact of a collaborative internal and external partnership approach to create the conditions for happy, healthy, vibrant communities.

The Councils' overarching vision is to build 'great communities with bright and healthy futures that everyone is proud to call home.' Wellbeing is one of six key overlapping and intertwined priorities to deliver that vision.

Well-Being is already a consistent theme across many of our Councils' adopted plans and policies, for example, our commitment to the environment and tackling climate change, our work to eradicate homelessness, our plans to increase leisure, sport and physical activity, our development of Planning policy and our work to support the realisation of resilient, sustainable communities. We now want to build on this and ensure that we adopt a wellbeing culture in everything we do; that our work is inherently about people's quality of life, sense of place and of identity.

In seeking to improve wellbeing in our communities the Councils are also strongly committed to continuing to work closely with statutory, voluntary and community sector partners and town and parish councils.

This strategy is based upon the current and likely future needs as we and our partners understand them at this point in time. We will continue to monitor the impact of Covid-19 and other local developments through evidence and insight and adapt the strategy to ensure what we do remains relevant and effective.

The Framework for this Strategy

This Framework:

- Sets out the overall Vision for the wellbeing of our communities;
- Defines the required Strategic long and short term **Outcomes** for the well-being our communities;
- Describes the approaches we will adopt; and
- Identifies the Strategic Objectives that need to be achieved to help get the right results.

A **Delivery Plan** to support this Wellbeing Strategy will set out the specific **Actions** required to meet the objectives. The Delivery Plan will be an operational document, meaning that it will be updated and reviewed on an ongoing basis to reflect project work and progress toward the Objectives.

Defining Wellbeing

Wellbeing, put simply, is about 'how we are doing' as individuals, within communities, in our local areas and society and how sustainable that is for the future. This is a holistic view of peoples' lives, taking into account not just health, but our opportunities, engagement and success in other areas of life including social, civic, economic and the built and natural environment.



The illustration above, from the What Works Wellbeing Centre, illustrates how the things we do, our interactions and our context contribute to our overall sense of wellbeing. The different aspects of our lives that affect our wellbeing are reflected in the variety of different measures for these factors. The Office for National Statistics collects the Measures of National Wellbeing, which organises data from national surveys and other sources into different areas of life affecting wellbeing. The full set of headline measures of national well-being are organised into the 10 areas set out below and includes both objective data and subjective data.

We have adopted these 10 areas as themes that help us understand what our strategic objectives should be and how we will address the need in our Districts.

Personal Wellbeing

Personal wellbeing includes individuals' feelings of satisfaction with life, whether they feel the things they do in their life are worthwhile and their positive and negative emotions.

Our Relationships

Positive relationships have one of the biggest impacts on our quality of life and happiness. This theme includes satisfaction with personal relationships and feelings of loneliness.

Health

An individual's health is recognised as an important component of their well-being. This theme contains both subjective and objective measures of physical and mental health.

What we do

How an individual spends their time and whether they find those activities rewarding. Includes work and leisure activities and the balance between them.

Where we live

Reflects an individual's dwelling, their local environment and the type of community in which they live. Measures include having a safe, clean, and pleasant environment, access to facilities and being part of a cohesive community.

Personal Finance

Reflects an individual's financial circumstances, recognising the role of income in realising other aspects of wellbeing and the pressure caused by financial hardship. Includes household income and wealth, its distribution and stability.

The Economy

Provides context for well-being as economic conditions drive outcomes for work, health, education, and crime. Includes measures of inflation and public sector debt.

Education & Skills

Includes aspects of education and the stock of human capital in the labour market with some more information about levels of educational achievement and skills.

Governance [Trust & involvement in decision making]

The sense of empowerment in government and of proper representation is important to individual wellbeing. It reflects a view of societal fairness and personal agency and includes participation in democracy and trust in institutions.

The Natural Environment

This theme concerns our engagement with the natural world now and our collective future. It reflects areas such as climate change, the natural environment and the effects our activities have on the global environment.

Our Strategic Vision for Well-Being

Our overarching vision for wellbeing in Babergh and Mid Suffolk is intended to encompass the themes of the Measures of National Wellbeing and provides a holistic approach to supporting residents' lives. The vision is that:

'The residents of Babergh and Mid Suffolk will have the best possible conditions for good wellbeing and have lives that are healthy, happy and rewarding.'

A summary of the key local well-being issues at this point

In considering the Approach, Outcomes and Objectives for this Strategy we have taken into account:

- the feedback from internal and external stakeholders during the workshops and briefings;
- the findings for Babergh & Mid Suffolk from the ONS Measures of National Well-Being survey and data; and
- Local information about the impact of the Covid-19 pandemic on our communities.

In summary, we are amongst the least deprived third of Local Authority areas in England, but relative deprivation is rising. Deprivation is made more challenging as it is often hidden, dispersed amongst areas with more affluent households. Housing costs are high, which when combined with low wages and skills levels, and now increased unemployment and significantly more people claiming out of work benefits, leads to financial hardship, ill health and inequality. Homelessness has risen during the pandemic, as has food poverty. We have comparatively high levels of fuel poverty. As an aging demographic, dementia is a growing

issue and there is a need to support our growing aging population to remain independent and in good health for as long as possible. Mental health issues have increased during the pandemic for all age groups and referrals to mental health services have risen significantly. Domestic abuse has also increased. Isolation and loneliness has become an even bigger issue over the last year for both young and old. A quarter of the population don't take regular exercise and 1:4 year 6 children are overweight or obese. Anti-Social Behaviour and County Lines drug related issues are an issue of concern in some parts of the districts. As predominantly rural districts, many of our places lack adequate transport provision and sometimes also broadband. Access to green spaces, parks and woodlands involves more travel and has a lower reported rate of use than might be expected. Some residents therefore experience barriers to opportunities and social mobility.

Comments from stakeholders reflected that they had observed the above similar patterns and were keen to see these prioritised in the strategy. They were also keen to see an increase in support for families and young people as they were concerned about lasting social, economic, emotional, and educational impacts of the pandemic for these groups. Digital isolation was also an area of concern as there was recognition that increasingly digital isolation can also exacerbate social isolation, having become an important part of community connectivity and communication in addition to in person contact.

Overall, there was recognition of the importance of enabling and supporting individuals at greatest risk, and those experiencing the greatest health inequalities, to be better able to take care of themselves and their health. Similarly, there was concern to identify groups and communities who find it more difficult to seek help.

The importance of delivering wellbeing improvements through behavioural change, integrated working and pooling resources and expertise was also recognised.

Stakeholders were keen to build on the unprecedented levels of community volunteering during the pandemic to increase social capital and strengthen civic participation. Similarly, they wanted to see a continuation of the collaborative approaches and innovative ways of working adopted by partners during this period.

The importance of prevention and early intervention was an underpinning theme in many of the discussions.

Finally, our engagement work identified a shared ambition to enable communities to live and stay well, take control of their own mental and physical wellbeing and to be able to do so locally, where they live and work.

Our Approach

Our approach to realising the Wellbeing Strategy reflects the views from the stakeholder engagement and is set out in the diagram below. While being similar to the principles in the Babergh & Mid Suffolk Communities Strategy, it is also in line with the jointly agreed approaches in the Suffolk Health & Well-Being Strategy, the Ipswich & East and West Suffolk Alliance Strategies and Western Suffolk Community Safety Partnership Plan.

A place based approach

We will work with people and communities based on where they live or work, not on our internal organisational structures or administrative boundaries.

A collaborative approach

We will work more effectively across teams, with our partners and communities, so we are more integrated in our approach to local issues.

A devolved approach

We will promote local decision making and local management of assets and other resources.

A preventative approach

We will build on early interventions that have the greatest long-term impact and we will encourage and enable communities to deliver and sustain preventative work themselves.



An enabling approach

We will provide resources and toolkits, as well as personalised advice, to help empower and enable communities to deliver the things they really want.

A partnership approach

We will identify and work with partners who are best placed and suitably skilled to support shared outcomes.

A needs based approach

We will utilise locally expressed needs as well as other data and evidence to prioritise our resources on places and people experiencing hardship or disadvantage where our support is needed most.

inclusive approach

We will reach out to underrepresented groups, supporting them to be active in their communities and to play a part in the decisions that affect them..

An intelligence led approach

We will develop and maintain data and local intelligence, so we understand more about our localities, their current and future challenges and opportunities, and how to target our interventions to best effect.

A values-based approach

We will ensure that our organisational values of positivity, honesty and personal responsibility underpin the new relationship with our communities..

What does our Wellbeing Strategy aim to achieve?

Our priority is to do everything we can to stimulate and enhance the social, economic, environmental and cultural wellbeing of our communities and these broader 'determinants of health' are also the types of issues over which Councils have some control and influence.

Our long-term outcomes to 2027

Our long-term focus will be on enabling:

- Families to lead active, healthy, safe, and independent lives and manage their own health & wellbeing;
- All communities to have sustainable and inclusive places, and spaces, which maximise health & wellbeing opportunities and benefits; and
- A reduction in Health inequalities.

As this strategy spans the period to 2027, our long-term outcomes are supported by a set of shorter-term outcomes that will focus on the next two years and are accompanied by more detailed objectives set out later in this document.

These short and medium term outcomes for the next two years have been themed in line with the 5 Measures of Wellbeing that this strategy will focus on most, namely personal wellbeing, our relationships, Health, the local communities where we live and what we do with our time. The other 5 Measures of Well-Being will be led primarily through other strategies and delivery plans, as set out in the table below.

Measure of well-Being	Primary Babergh & Mid Suffolk strategy that will
	focus on this area of Well-Being
Personal Wellbeing	Wellbeing Strategy
Our relationships	Well-Being Strategy
Health	Well-Being Strategy
What we do (includes both work and non-work time)	Well-Being Strategy (with the key skills and
	employment aspects being led through the Economy
	Strategy)
Where we live	Well-Being Strategy, Homes & Housing Strategy &
	Joint Local Plan
Personal Finance	Communities Strategy
The Economy	Economy Strategy (soon to be revised)
Education & Skills	Economy Strategy (soon to be revised)
The natural environment	Carbon Reduction Management Plan & Bio-Diversity
	Plan and the wider Environment Strategy due to be
	developed in 2021/22.
Governance (Trust and involvement in local decision	Communities Strategy
making)	

Our short to medium term outcomes

Wellbeing In	eme: Persona	al Wellbeing
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The identities and contributions made by people, communities, and local organisations to life in our Districts will be celebrated and further encouraged and developed.

People will have access to resources and activities that support good mental wellbeing and reduce anxiety

Wellbeing Theme: Our Relationships

People will have opportunities for social connection, whatever their situation, and fewer people will feel lonely.

People who care for and help others will be well supported and valued.

Support will be available to people who are abused or exploited, and action will be taken against those that abuse others

Wellbeing Theme: Health

People will have good mental and physical health throughout most of their lives, and will be supported by the right opportunities, facilities and activities.

People with disabilities, long term health conditions and additional needs will be supported to access and enjoy all aspects of a full life, as independently as possible.

Wellbeing Theme: What we do

People will be able to participate in a rich choice of sport, arts and culture across the districts.

People will be equipped and empowered contribute to their communities as part of a thriving community, voluntary and charitable sector.

Wellbeing Theme: Where we live

People will have areas in which to live that are safe, clean, and pleasant.

People will be able live without fear of crime, anti-social behaviour, hate or exploitation.

People will have access to homes that are affordable, well-built, sustainable, attractive and in tune with their surroundings

People will be part of cohesive, vibrant, and active communities that embrace identity and heritage.

People will have convenient access to services.

People will have access to natural spaces.

Our Objectives to Support the Short to Medium Term Outcomes

The table below details the supporting objectives that will steer the activity to be delivered and developed as part of the Wellbeing Delivery Plan.

Outcomes	Objectives
Wellbeing Them	e: Personal Wellbeing
The identities and contributions made by	The Councils will champion the commitment and impact of individuals living and working in our District on the quality of life for others.
people, communities, and local organisations	The Councils will champion the work of local charitable organisations in support of our communities.
to life in our Districts will be celebrated and further encouraged and developed.	The Councils will work with VCSE organisations, Health partners and schools to develop a Youth Social Prescribing Programmes to support young people and their families reduce levels of anxiety, low self esteem and poor mental and physical health.
People will have access to resources and	The Councils will work in partnership with other organisations and with communities to tackle social isolation and loneliness.

activities that support good mental wellbeing and reduce anxiety

The Councils will enable and support community health and wellbeing activities by partners to reduce obesity, mental health concerns, loneliness and social isolation.

The Councils will ensure continued staff training and development on the links between homelessness, mental health, drugs and alcohol, gangs, county lines, 'Making Every Contact Count' and Domestic Abuse/Violence.

The Councils will collaborate with partners on social prescribing schemes and non-medical referral options to improve wellbeing.

The Councils will work with partner organisations to reduce levels of anxiety and poor mental health caused by concerns about money, benefits, housing and employment.

The Councils will support and promote the work of VCSE and other charitable organisations to ensure that individuals and families know where they can go for support when facing a crisis

The Councils will emphasise their Active Wellbeing programme and enhance their physical activity offer, focusing on older people and those living in rural areas to remain active and connected to their communities.

The Councils will promote and provide opportunities that support good mental health and wellbeing in our communities.

Outcomes

Objectives

Wellbeing Theme: Our Relationships

People will have opportunities for social connection, whatever their situation, and fewer people will feel lonely The Councils will work in partnership with other organisations and with communities to tackle social isolation, loneliness and mental health.

The Councils will enable and support community health and wellbeing activities to reduce obesity, mental health concerns, loneliness, and social isolation.

The Councils will work to enable social connections for those at greatest risk of loneliness and support others to do the same.

People who care for and help others will be well supported and valued

People with caring responsibilities will have access to support to maintain their own wellbeing.

People with caring responsibilities will have access to activities to prevent them becoming isolated.

Support will be available to people who are abused or exploited, and action will be taken against those that abuse others Agencies will work together to promote awareness and prevent domestic abuse, give support to those in abusive relationships and to those fleeing abuse.

Agencies will work together to promote awareness and prevent radicalisation, to identify and support those at risk and tackle those wishing to exploit people through extreme ideologies

Agencies will work together to identify and tackle incidents of 'mate crime' where criminals prey on vulnerable members of the community and use their resources for crime, such as 'cuckooing' for drug crime.

Wellbeing Theme: Health

Reduced levels of inactivity and obesity amongst communities and in localities experiencing greater health inequalities.

Increased opportunities to move more through a diverse, inclusive, and accessible programme of activities.

Sustainable community sport, leisure and physical activity facilities that enable and support people to be active.

People will have good mental and physical health throughout most of their lives, supported by the right opportunities, facilities, and activities. Green and open spaces providing formal and informal opportunities to be 'everyday active'.

A strong, sustainable and strategically aligned ecosystem of partnerships supporting residents to be more active

The Councils will promote healthy communities through services and facilities that we provide.

The Councils will work with other organisations to create opportunities for people to be healthier and more active and to sustain this so that they can age well.

People will be supported by the Councils, in partnership with others, to have healthy lifestyles for all life stages including healthy eating and habits for good mental health so that people can live ang age well.

People will be supported by the Councils, in partnership with others, to avoid risky behaviours and reduce the impact of smoking, drinking and substance misuse on our communities.

The Integrated Neighbourhood Teams (INTs) (part of the multi-agency Connect Programme) will establish programmes for specific local needs and prevalent conditions.				
Where people struggle to provide healthy food for themselves through financial hardship they will be supported to secure necessities in the short term and improve their financial circumstances in the long term.				
Everyone has a suitable home, and residents are able to live as healthily, safely, independently as possible within sustainable Communities				
Homebuilders will be encouraged to consider the changing needs of our population and include homes within major developments that address those needs.				
The Councils will consider the needs of people with disabilities, mobility issues or additional needs in all their buildings and make all reasonable and practicable adjustments				
The Councils will consider the needs of people with disabilities or additional needs in the design and delivery of their services.				
The Councils will consult with representative organisations for people with disabilities or additional needs when taking major decisions that may affect them.				
Objectives				
ne: What we do				
Support the rich culture and arts in our communities and ensure that it is celebrated and promoted. We will do this by aiding the development of venues, growth of organisations and creation of new activities not just in the towns but more widely.				
The venues and organisations that enable cultural activity in our Districts will be supported to thrive.				
People will be able to access cultural organisations, venues and events that increase their wellbeing and understanding of others				
Settlements across Babergh and Mid Suffolk, many of which contain historic assets, tourism, and leisure facilities, play an important role within the districts. New development that supports this role will be encouraged, where appropriate in the scale, character, and nature of their locality.				
People will be able to participate in cultural activities that contribute to their wellbeing and engagement with others.				
People will be happier, more resilient, and more connected through taking part in cultural activity.				
Develop insight into which groups in our communities are less physically active and where, to ensure resource is targeted where it is most needed and will have the most impact				
Increase the number and frequency of people from identified target groups and localities taking part in regular physical activity				
Encourage and increase locally based sports provision through more community use of schools, community centres, village halls and sports club facilities				
The Councils will support community and charitable organisations to develop and to grow their contribution to life in our communities				
The Councils will support and help coordinate volunteering activities across our districts as part of the Suffolk Volunteering Strategy.				
The Councils will encourage our staff to take up volunteering opportunities, playing a direct role in the communities in which they live.				
We will support community and charitable organisations to develop projects and their contribution in our communities.				
Objectives				
ne: Where we live				
The Councils will work in partnership with others to tackle crime and Anti-Social Behaviour across our Districts.				
Our communities will be supported to feel and be safer through refocused and improved community safety work.				

People will be able to report fly-tipping easily and the Councils will take action to deter and enforce against fly-tippers and to ensure fly-tipping is cleared.
The Councils will protect the environment in which people live and work, in relation to noise, waste and pollution.
The Councils will ensure that licensable activities are appropriately permitted, and conditions are observed.
The Councils will support the work of the Western Suffolk Community Safety Partnership to tackle the challenges across our Districts, including Modern Day Slavery, Hate Crime, Violence Against Women & Girls and Anti-Social Behaviour.
The places that we build or are built by others where the Councils are able to influence, will be designed to deter crime.
Anti-Social Behaviour affecting our tenants or by them will be tackled using enforcement, mediation, and referrals for treatment interventions where necessary.
People live in vibrant and well-connected communities; and homes and communities continue to meet the changing needs of residents.
Everyone has a suitable home, and residents are able to live as healthily, safely, independently as possible within sustainable communities.
The Councils have strong relationships with residents, developers and other partners that enable the delivery of housing, infrastructure and services effectively, innovating where appropriate.
The Councils will contribute to vibrant communities and seek to embody the same, through richness and diversity of culture, experience and perspectives.
People will have many opportunities to build social connections and reduce loneliness.
Activities will be supported that bring together different sections of society and foster social cohesion, for example inter-generational activities, mentoring, cultural showcases, and inter-faith work.
People will feel encouraged and enabled to volunteer in their community.
Encourage civic and community engagement to improve a sense of belonging and create strong links within the wider communities.
People will have access to high quality parks, open spaces, countryside sites and play areas.
Use of natural and green spaces will be encouraged through activities provided by the Councils and others.

Working in Partnership

In seeking to improve wellbeing in our communities the Councils are strongly committed to continuing to work closely with statutory, voluntary and community sector partners and town and parish councils.

On this specific strategy there is particularly strong alignment with the Suffolk Health and Well-Being Board and the Ipswich & East and West Suffolk Alliances.

The Babergh and Mid Suffolk Wellbeing Strategy is consistent with the broader ambitions contained within the Suffolk-wide Health & Well-Being Board's Health & Wellbeing Strategy, including a focus on prevention, reducing health inequalities and enabling resilient communities. Other priority areas are also aligned including supporting people to optimise their own health and well-being, a focus on young people, supporting older people to age well and giving people the opportunity to improve mental health and wellbeing.

There is similar alignment with both of the Alliance Strategies, which have similar shared principles. ^{61,62}. We are supporting this work through our involvement locally through the Connect areas in the joint delivery of Integrated Neighbourhood Team Action Plans and activities that will enable people to stay well in their communities and retain their independence and good health and wellbeing for as long as possible.

The Connect Programme harnesses the statutory, voluntary and community sectors to work together to improve the health and well-being of communities. Babergh and Mid Suffolk is covered by five Integrated Neighbourhood Teams, namely Sudbury, Stowmarket, Eye/North West, South Rural and Bury Rural.

The Strategy will also support the priorities of the Western Suffolk Community Safety Partnership working alongside the police, local authorities, fire and rescue, probation service and health to address, local issues like anti-social behaviour, drug or alcohol misuse, domestic abuse and re offending.

A new joint Assistant Director post for Wellbeing, funded by Babergh & Mid Suffolk District Councils and the two Clinical Commissioning Groups, has been established to lead this new Wellbeing Strategy.

What do we know from local data and national research about the impact of Covid on Wellbeing of our Communities?

It is clear that the pandemic and the social distancing and lockdown measures imposed to manage Covid-19 have impacted on individuals, households and communities through the restrictions imposed on everyday social and economic activities.

Public Health England research has shown that the risk of catching Covid-19 and the likely outcomes are not evenly distributed within society, and this is true within our Districts. Greater age correlates to greater risk of serious illness and death from a Covid-19 infection. Other characteristics also infer greater risk; gender, deprivation, ethnicity and occupation all affected risk.

- Despite making up 46% of diagnosed cases, men make up almost 60% of deaths from COVID-19 and 70% of admissions to intensive care units.
- The mortality rates from COVID-19 in the most deprived areas were more than double the least deprived areas, for both males and females.
- The highest...[rates] were in people of Black ethnic groups ...and the lowest were in people of White ethnic groups...People of Chinese, Indian, Pakistani, Other Asian, Black Caribbean and Other Black ethnicity had between 10 and 50% higher risk of death when compared to White British.
- ONS reported that men working as security guards, taxi drivers and chauffeurs, bus and coach drivers, chefs, sales and retail assistants, lower skilled workers in construction and processing plants, and men and women working in social care had significantly high rates of death from COVID-19.⁴⁵

The instability in the economy undermines individual and family wellbeing, especially for the unemployed and those experiencing the prospect of redundancy, wage reductions and a reliance on benefits. Homelessness and the challenges of accessing social housing have a disproportionate impact on the most disadvantaged.

While the impact and duration of these changes is unknown, there has been a marked impact on employment in the data available so far. In January 2020, the unemployment rate for Suffolk was 2.4% and in December 2020 it had risen to 4.0% (people aged 16-64yrs). This impact particularly affected young people aged 16-19 years where the rate rose from 7.2% to 22% in the same period⁴⁷. This has been reflected in the number of people claiming unemployment benefits, which increased significantly at the first lockdown and remains high. For Babergh the count jumped from 861 to 2,110 claimants and in Mid Suffolk from 796 to 1,900 claimants for the same period⁴⁸.

The number of people claiming Universal Credit, which includes both people out of work and on low incomes, increased correspondingly during 2020 with rates in both Districts approximately doubling (Babergh 98.6%, Mid Suffolk 103.5%)⁴⁹. The increases were approximately 55% greater amongst male claimants in both Districts⁵⁰. By the end of June 2020, when the furlough scheme was closed to new individuals, 12,400 (32.3%) employments in Babergh and 13,700 (30.6%) employments in Mid Suffolk had been furloughed at some point since the scheme was launched in March 2020. This was in line with regional (30%) and national (32%) averages⁵¹.

As well as challenges to people's incomes, different sections of the economy have been affected differently. New job postings in Suffolk jumped significantly in the first three months of 2020 for Transportation & Storage (53 new job postings in January 2020 to 854 in March 2020) and for Wholesale & Retail (906 new job postings in January 2020 to 2,285 in March 2020). This growth in advertised jobs was temporarily set back by each of the national 'lock downs' but continued an upward trend through to the most recent data (1,509 for Transportation and Storage and 3,272 for Wholesale & retail in May 2021). The same trend was evident to a lesser degree in Construction and Manufacturing. Other sectors dropped significantly before the pandemic, recovering slightly since - Administrative & Support, Information & Communication, Professional, Scientific & Technical and the Visitor economy⁵².

The period before the first lockdown correlates to Britain's exit from the European Union and since March 2020 correlates to dramatic changes to people's routines, lifestyles, and spending habits due to the restrictions of the pandemic, in many cases switching activity online. Regardless of any interpretation of the causes, effects and long-term trends, the combined period has clearly been and remains volatile for people's employment, finances, and prospects.

Periods of highest social restriction or 'lockdowns' are associated with impacts on people's emotional wellbeing, relationships and mental health. Domestic abuse saw an increase in support cases referred, third party calls to the police and changing perpetrator profiles⁵³. More than 1 in 3 people in Suffolk are estimated to have experienced high anxiety⁵⁴. Depression in health care workers (50%) and burnout in doctors (44%) are issues highlighted by Public Health Suffolk⁵⁵.

Some studies have shown that the pandemic and restrictions have changed many people's habits nationally; some for better and some for worse. Many people changed their drinking habits (34.4%). Many increased (49% overall) but some heavier drinkers (40.1% of that group), particularly younger heavy drinkers (91.5%), decreased. 1 in 10 smokers stopped during the pandemic (12.9%) but those that still smoke, smoke more (39%)⁵⁶. There is evidence that some non-gamblers took up online betting during lockdown (4% of study). Some of those continued after lockdown ended (1.4%), with 14.1% gambling more often.⁵⁷.

For young people there are particularly acute challenges. The Education Select Committee on the impact of the pandemic received evidence that the loss of learning disproportionately affected school children from deprived backgrounds, increasing their disadvantage⁵⁸. They also heard that 83% of respondents in a survey of young people with existing mental health needs during the first lockdown felt the pandemic was making their mental health worse⁵⁹. Young people were more likely to feel lonely before the pandemic ⁶⁰, and it is reasonable to believe their social interactions will have been particularly affected by the restrictions on hospitality venues. As already stated, young adults are also more likely to be negatively affected in employment terms.

These factors provide an immediate challenge to the wellbeing of people in our Districts and a clear need for us to act. This Wellbeing Strategy underpins our actions, and we will continue to monitor and adapt it as the pandemic and its effects evolve.

What does the Office of National Statistics tell us about Wellbeing in our Districts according to the <u>Measures of National Wellbeing?</u>

Personal Wellbeing

In pre-pandemic polling, on average residents in Mid Suffolk scored their personal wellbeing and levels of anxiety as close to the England average. Residents in Babergh scored their wellbeing slightly higher than average^{1,2} and their anxiety lower³. The incidence of mental ill health was lower than the national average in both districts.⁴

Generally, while a minority of residents face personal wellbeing challenges, life could be described as happy and unworried for many.

It is a note of concern however that for the latest period available the suicide rate was above the national average for both districts, particularly amongst men.⁵ Referrals to mental health services for all ages has increased.

Our Relationships

The percentage of residents describing themselves as often or always lonely was above the England average in Mid Suffolk and below the average in Babergh⁶. Even at the lower rate in Babergh, more than one in twenty people being often or always lonely suggests that social isolation is a wellbeing challenge we need to address.

For both districts around a third of adults were not living as a couple (i.e., single, divorced, separated, widowed, or married and living apart)⁷ and around a quarter were living alone⁸ at the last Census. While social connection outside of the home is of importance to most it will be crucial to a significant minority.

Health

Overall, the physical and mental health of people in both Districts is generally similar or better than the national average⁹ and life expectancy is higher^{10,11}, so people in Babergh and Mid Suffolk are in relatively good health. Most people in both districts take some form of regular exercise, though around one in four do not^{12,13}.

The healthy life expectancy for most people is comparatively high^{14,15,} and the proportion of people living with a disability is low¹⁶.

There are, however, areas to improve. For instance, whilst childhood obesity is below the national average, still more than 1 in 4 year 6 children were overweight or obese¹⁷ with the associated lifetime health implications.

Supporting healthy lifestyles at all ages and in particular reaching those that are inactive or with poor diets would be beneficial.

What we do

The level of unemployment in both Districts is low, relative to others, but has increased during the pandemic, ^{18,19} with younger people being most affected. Recent data was not available for the proportion of people that felt they had 'good jobs' however in 2016 it was around half.²⁰

The level of participation in sport¹² and volunteering are higher than the England average.²¹ Both districts are rich in heritage assets and museums which are well visited.^{22,23} Access to green spaces, parks and woodlands involves more travel and has a lower reported rate that might be expected.^{24,25}

Where we live

People are affected by the rural nature of both Districts in that residential and employment locations are dispersed and transport is very reliant on car ownership. People are less likely to walk or cycle for travel than the national average. ^{26,27} They are likely to travel for longer to reach services ²⁸ and slightly more likely to be killed or seriously injured on the road. ²⁹

The level of crime is comparatively low in most areas,³⁰ though some communities will require support with anti-social behaviour and County Lines drug crime is a threat to vulnerable and young residents.

Making it happen

Building upon the proposed long and shorter-term Outcomes and Objectives described in the tables above, the next stage is to build on our existing work on wellbeing and develop a Delivery Plan to support this new strategy.

The key actions will be subject to ongoing review and will be developed in partnership with key internal and external stakeholders to ensure joined up planning, delivery and resourcing.

The next stage will focus on:

1. What?

What key actions are needed to achieve the Strategic Objectives and contribute to the Strategic Outcomes?

2 How?

How are these key actions will be achieved and what are the more specific detailed actions that sit below these?

3. Who?

Who will lead on the actions and what role will partners play in helping to deliver them?

In addition to this, the Councils' other key strategies will be reviewed to ensure that well-being outcomes are being optimised through those strategies and performance in relation to those aspects will be included when we are reporting on performance in respect of well-being.

Measuring and reporting on progress

The progress and effectiveness of the strategy will be tracked in a number of ways:

- ONS surveys and data gathered against the Measures of National Well-Being will continue to be used as a high level measure;
- More detailed measures of success will be drawn up as part of the outcomes and performance framework currently being developed to support the Councils' Corporate Plan;
- The Communities and Well-Being Programme Board will oversee progress, in detail, against the Wellbeing Delivery Plan and strategic outcomes;
- Performance will be reported quarterly to Cabinet;
- Progress against the strategy will be reported twice yearly at All Member briefings;
- Key measures from the underpinning data for this strategy will form a dashboard to track changing conditions for wellbeing and will inform whether our tactics need to change.

Appendices & footnotes

Appendix 1: Wellbeing Strategy 2021 - 2027

Appendix 2: Case Studies

Appendix 3: Equality Impact Assessment Initial Screening

Personal Wellbeing

1	Survey where respondents were asked to score their satisfaction with life out of 10: (10 is better)	Babergh 8.24/10	Mid Suffolk 7.18	England 7.66	Annual personal well-being estimates - ONS	2019-
2	Survey where respondents were asked to score how happy they felt yesterday: (10 is better)	Babergh 7.86/10	Mid Suffolk 7.55	England 7.48	Annual personal well-being estimates - ONS	2019-
3	Survey where respondents were asked to score how anxious they felt yesterday: (0 is better)	Babergh 2.81/10	Mid Suffolk 3.02	England 3.05	Annual personal well-being estimates - ONS	2019-
4	Estimated prevalence of common mental disorders % of population 16+yrs:	Babergh 14.1%,	Mid Suffolk 12.7%	England 13.7%	Public Health Profiles - PHE	2017
5	Suicide rate per 100,000	Babergh 10.3	Mid Suffolk 10.8	England 10.1	Public Health Profiles - PHE	2017- 19

Our Relationships

6	Percentage of people	Babergh	Mid Suffolk	England	Loneliness rates	Oct 20
	who "often or always"	5.92%	8.76%	7.26	and well-being	– Feb
	felt lonely:				indicators - ONS	21
7	Percentage of adults	Babergh	Mid Suffolk		Census Data	2011
	who are not living as a	34.0%	31.7%			
	couple:					
8	Percentage of 1-person	Babergh	Mid Suffolk		Census Data	2011
	households:	28.2%	25.4%			

Health

9	Local Authority Health	<u>Babergh</u>	Mid Suffolk		As left	2019
	Profile	<u>PHE</u>	<u>PHE</u>			
10	Life expectancy at birth:	Babergh	Mid Suffolk	England	<u>Suffolk</u>	2017-
	Female	85.2yrs	85.0yrs	83.4yrs	Observatory –	19
					Data Explorer	

11	Life expectancy at birth: Male	Babergh 81.8yrs	Mid Suffolk 81.8yrs	England 79.8yrs	Suffolk Observatory –	2017- 19
	Iviale	01.0y13	01.0y13	73.0y13	Data Explorer	13
12	Amount of at least moderate intensity physical activity a week: less than 30 minutes	Babergh 22.9%	Mid Suffolk 24.3%	England 24.6%	Active Lives Results - SportEngland.org	Nov 2019- 20
13	Amount of at least moderate intensity physical activity a week: 30-149+ minutes	Babergh 77.1%	Mid Suffolk 75.7%	England 75.6%	Active Lives Results - SportEngland.org	Nov 2019- 20
14	Healthy life expectancy (upper age band 85+) Male	Babergh 67.5yrs	Mid Suffolk 67.6yrs	England 63.5yrs	Local Health - PHE*withdrawn	
15	Healthy life expectancy (upper age band 85+) Female	Babergh 68.5yrs	Mid Suffolk 68.7yrs	England 64.8yrs	Local Health – PHE*withdrawn	
16	Persons aged 16-64 registered disabled at Equality Act core level:	Babergh 18%	Mid Suffolk 12.6%	England 19.5%	Suffolk Observatory	Dec 2020
17	Children in year six classified as overweight or obese	Babergh 29.7%	Mid Suffolk 29.7%	England 34.3%	Public Health Profiles - PHE	2018- 19

What we do

18	Unemployment rate: March 2020	Babergh 2.8%,	Mid Suffolk 2.5%	England 4%	Suffolk Observatory	Mar 2020
19	Unemployment rate: December 2020	Babergh 3.2%,	Mid Suffolk N/A	England 5%	Suffolk Observatory	Dec 2020
20	Economically active adults who view themselves as having 'good jobs':	Babergh 48.91%	Mid Suffolk sample too small	Suffolk 51.2% England 53.3%	Office for National Statistics	Dec 2016
21	Adults that volunteered at least twice in the last year in any role:	Babergh 19.2%	Mid Suffolk 18.4%	England 13.3%	Sport England	Nov 2019- 20
22	Heritage assets score in 2016:	Babergh 223 out of 325	Mid Suffolk 299	N/A	Heritage Index - Royal Society for Arts, manufactures and commerce	2016
23	Population visiting heritage assets	Babergh heritage sites 62%, museums 42%, industrial heritage sites 18%,	Mid Suffolk heritage sites 66%, museums 59%, industrial heritage sites 26%,	N/A	Heritage Index - Royal Society for Arts, manufactures and commerce	2020

		historic	historic			
		parks and	parks and			
		gardens	gardens			
		61%,	32%			
24	Population with access	Babergh	Mid Suffolk	United	Woodland Trust	2017
	to a 2hectare or greater	32.5%,	45.2%,	Kingdom		
	woodland within			67.9%		
	4,000m:					
25	Proportion of land	Babergh 3%	Mid Suffolk	United	BBC News	2017
	classed as 'natural':		2%,	Kingdom	(European	
				35%	<u>Environment</u>	
					<u>Agency)</u>	

Where we live

26	Adults that walked for travel at least three days a week:	Babergh 14.3%	Mid Suffolk 12.2%	England 22.7%	Public Health Profiles - PHE	2018/19
27	Adults that cycled for travel at least three days a week:	Babergh 0.4%	Mid Suffolk 1.5%	England 3.1%	Public Health Profiles - PHE	2018/19
28	Average minimum travel time to reach nearest services by car:	Babergh 14.2 minutes	Mid Suffolk 14.6 minutes	England 10.8 minutes	Journey time statistics - GOV.UK	2017
29	Killed and seriously injured casualties on roads per 100,000:	Babergh 44.8	Mid Suffolk 46.6	England 42.6	Public Health Profiles - PHE	2016-18
30	Rate of all crime types (excluding fraud) per 1,000 persons over one year:	Babergh 53.9	Mid Suffolk 41.9	England 79.9	<u>LG Inform</u>	2020

The impact of Covid

45	Disparities in the risk and outcomes of COVID-19	Public Health England	Aug
			2020
46	Suffolk CoronaWatch dashboard: Rate of	Suffolk Office of Data &	Jan
	Unemployment	<u>Analytics</u>	2020-
			Dec
			2020
47	Suffolk CoronaWatch dashboard: Rate of	Suffolk Office of Data &	Jan
	Unemployment	<u>Analytics</u>	2020-
			Dec
			2020
48	Suffolk CoronaWatch dashboard: Alternative Claimant	Suffolk Office of Data &	Jan
	Count	<u>Analytics</u>	2020-
			Dec
			2020
49	Suffolk CoronaWatch dashboard: People Claiming	Suffolk Office of Data &	Jan
	Universal Credit – Local Authority	<u>Analytics</u>	2020-
			Dec
			2020

50	Suffolk CoronaWatch dashboard: Profile of People	Suffolk Office of Data &	Jan
	Claiming Universal Credit	<u>Analytics</u>	2020-
			Dec
			2020
51	Suffolk CoronaWatch dashboard: Unique Job Postings	Suffolk Office of Data &	Jan
		<u>Analytics</u>	2020-
			Dec
			2020
52	Impact of COVID-19 on Suffolk What do we know so	SODA - Healthy Suffolk	Apr
	far?	(request)	2021
53	Domestic abuse and Covid-19: A year into the	Houses of Parliament Library	May
	pandemic		2021
54	Suffolk work completed and underway in support to	Public Health Suffolk (Health &	July
	Mental Health and Emotional Wellbeing	Wellbeing Board presentation)	2020
55	Suffolk work completed and underway in support to	Public Health Suffolk (Health &	July
	Mental Health and Emotional Wellbeing	Wellbeing Board presentation)	2020
56	Over a third have changed their drinking habits over	UCL News - UCL - University	Apr
	the past year	College London	2021
57	Predictors and patterns of gambling behaviour across	Fluharty & Fancourt	Dec
	the COVID-19 lockdown: findings from a UK cohort		2020
	study		
58	Covid-19 and Education Inequality: a missed	<u>Parliamentary</u> Committee -	Mar
	opportunity?	Written Evidence	2021
59	Coronavirus: Impact on young people with mental	YoungMinds - Report	March
	health needs		2020
60	32.7% of 16-24yr olds reported feeling lonely some of	Office for National Statistics	2016-
	the time, often or always - Loneliness - What		2017
	characteristics and circumstances are associated with		
	feeling lonely?		

Making it happen

61	Ipswich and East Suffolk Alliance Strategy 2018-2023	Ipswich and East Suffolk	2018
		Alliance CCG	
62	West Suffolk Alliance Strategy 2018-23	West Suffolk Alliance CCG	2018





BABERGH & MID SUFFOLK DISTRICT COUNCILS

WELLBEING STRATEGY