

Outline

- Poverty – a very wicked problem
- From the workhouse to the workplace
- The extent and variation in poverty
- Progress so far
- The way forwards

Ripon workhouse in the 1850s

- Response to poor relief
- Workhouses ensured access to
 - Secure housing
 - Food
 - Basic healthcare
 - Education for children
- Deserving v undeserving poor
- Workhouses – harsh and prison like
- Problem of vagrancy
 - Mental health and addiction not understood
- Problem of worklessness

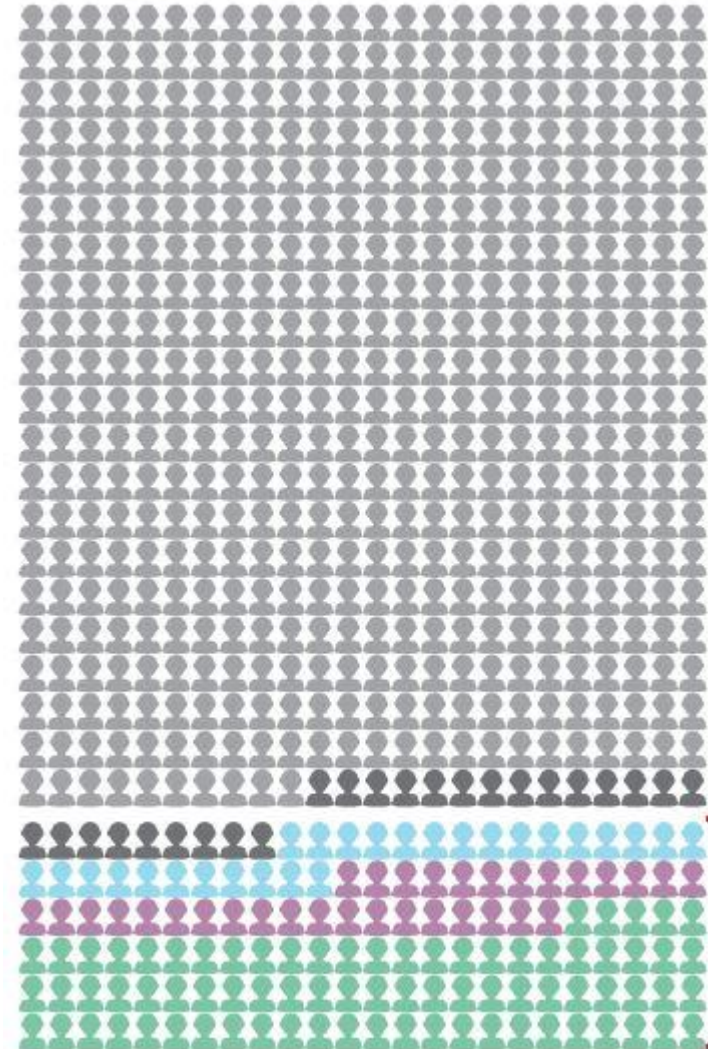


Poor UK

The different levels of poverty in the UK and the value of the UK poverty line. More than one-in-five of the UK population lives in poverty - that is 14,300,000 people (21%).



Total UK population 66.6m



14.3m People Living below the poverty line

Cycle of poverty

Based on a household with two adults and two dependent children, the current annual value of the Government's HBAI poverty line, after housing costs have been deducted, is set at £22,100.

The deep poverty line is measured at 40% of the annual average income, which is £14,733, based on the same family structure of two adults with two dependent children.



How does poverty affect health?

Lack of money in itself does not cause someone to be poorly, but the indirect influence of poverty does have a marked effect on health.

The wider determinants of health, which include economic characteristics such as unemployment and household income, have been found to have a greater influence on population health than health care and lifestyle behaviours.

Lifestyle factors, which are inextricably linked with the wider determinants such as household income, can lead to ill health.

What makes us healthy?

Good health matters, to individuals and to society. But we don't all have the same opportunities to live healthy lives.

To understand why, we need to look at the bigger picture:

Good work

Our surroundings

Money and resources

Housing

The food we eat

Transport

Education and skills

Family, friends and communities

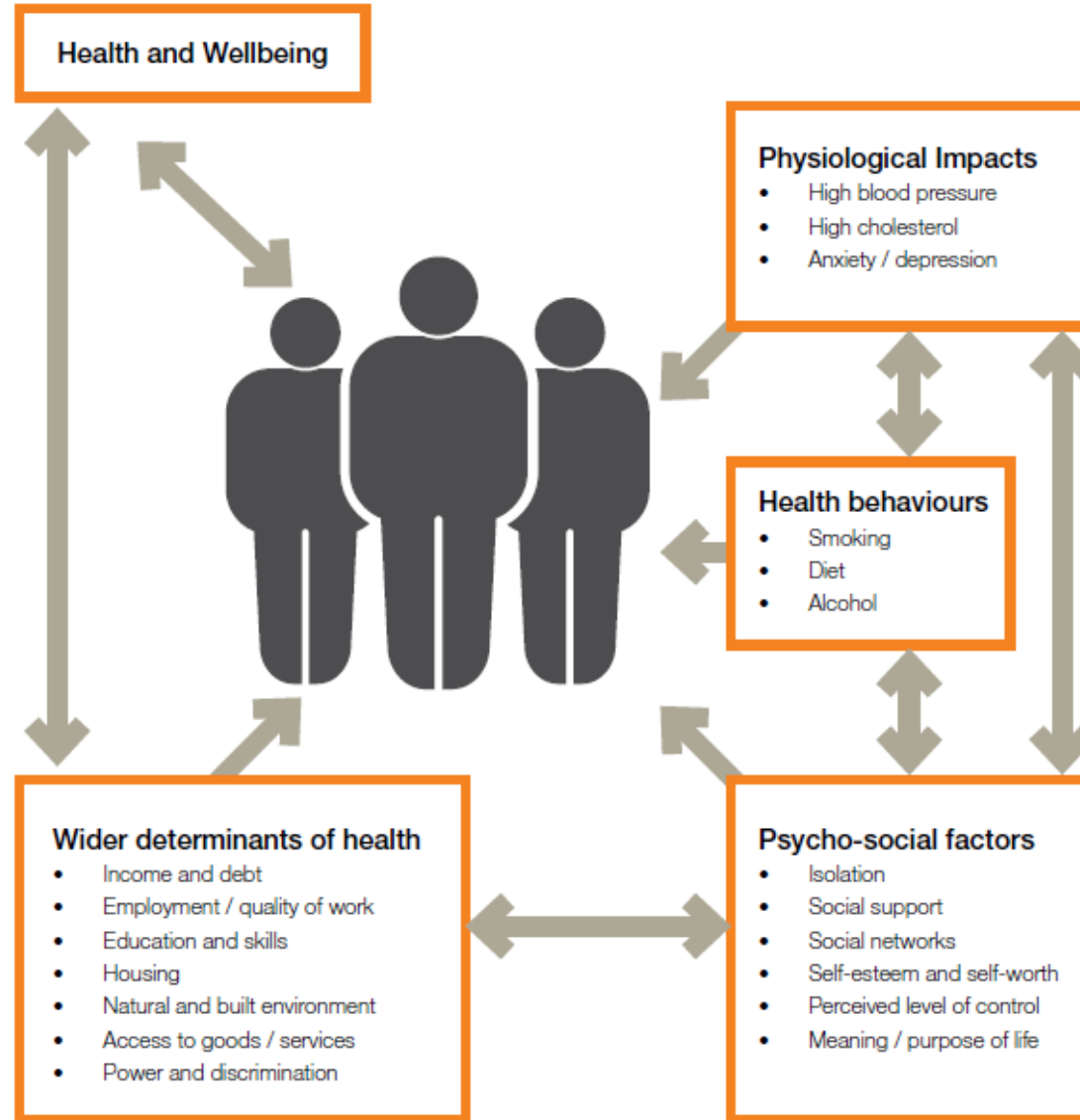
The healthy life expectancy gap between the most and least deprived areas in England is over **18** YEARS

Find out more: [health.org.uk/what-makes-us-healthy](https://www.health.org.uk/what-makes-us-healthy)

The Health Foundation

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System map of the causes of health inequalities



The Marmot Review

Set out the scale and distribution of health inequalities in England and the actions required to reduce them.

It outlined six policy objectives for reducing health inequalities:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill-health prevention.

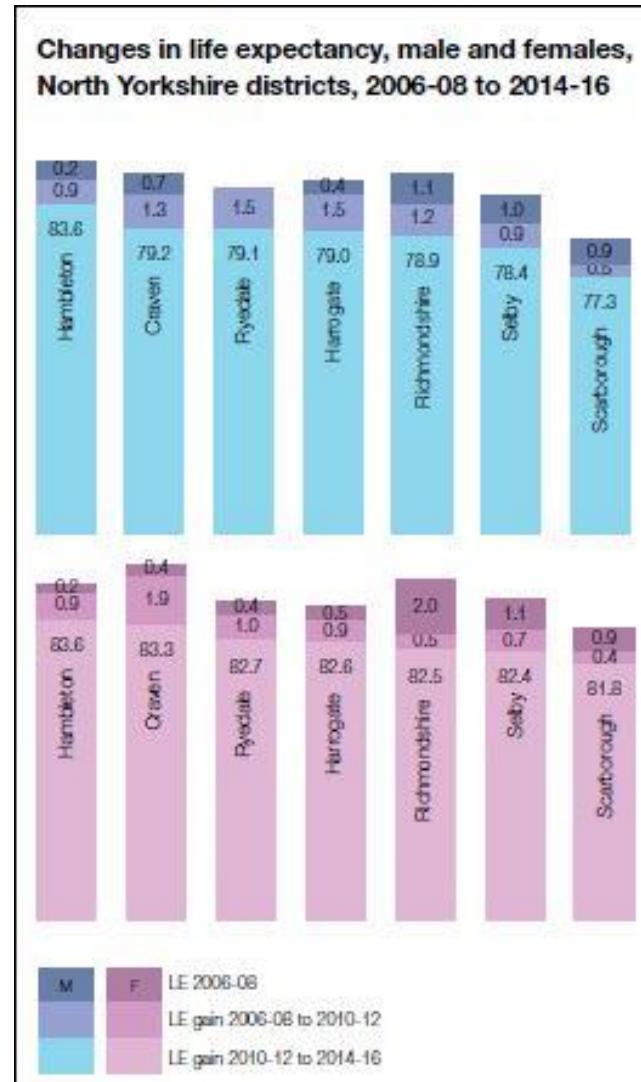


Life expectancy in North Yorkshire

Overall, health in North Yorkshire is better than average for England. Life expectancy (LE) at birth is significantly higher for males and females, but the rate of change appears to be reducing.

Scarborough continues to have the lowest life expectancy in North Yorkshire

Healthy life expectancy in North Yorkshire - the number of years someone can expect to live in good health from birth to death - is significantly higher than the England average for females, but not significantly different for males.



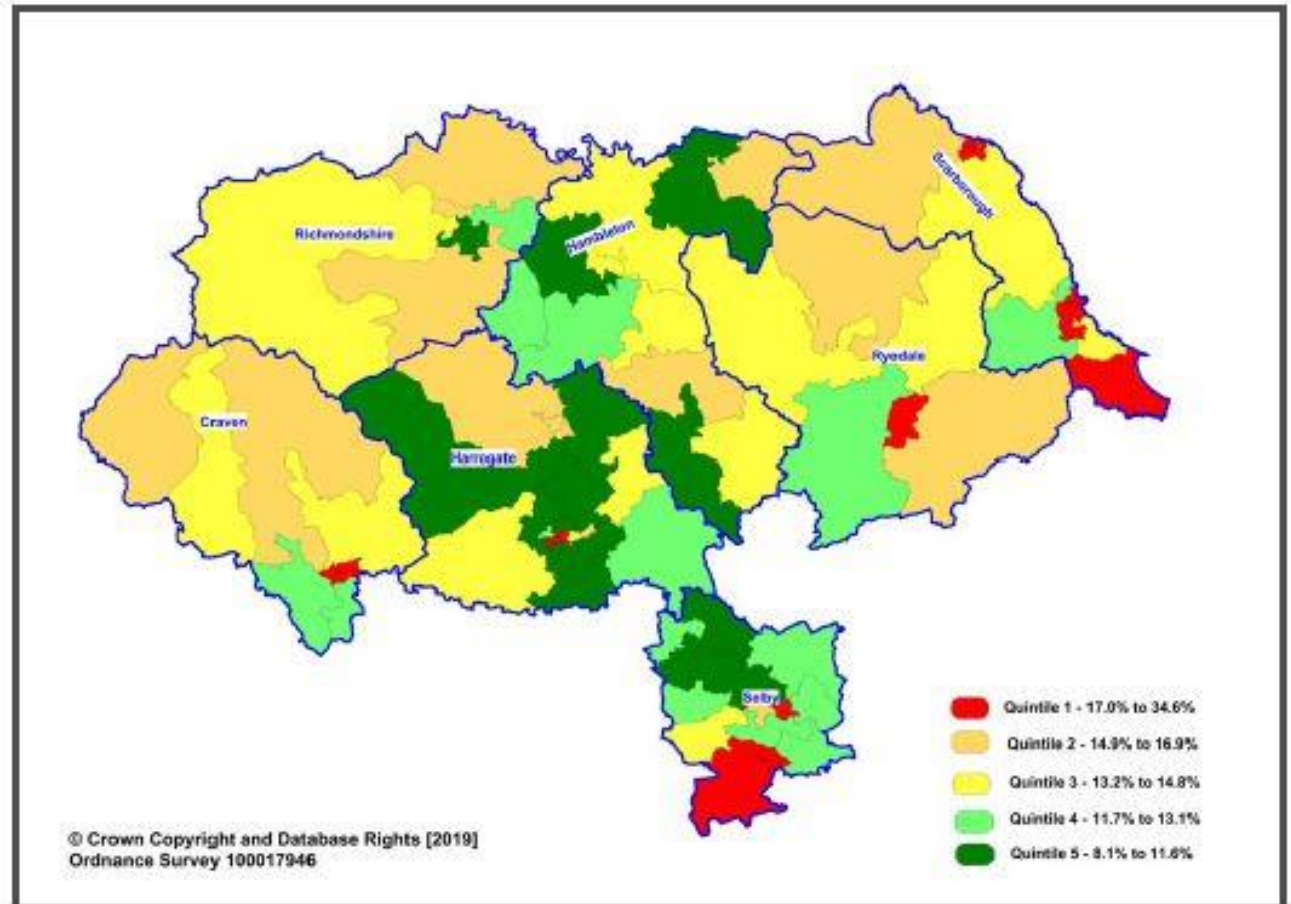
Poverty in North Yorkshire

Households in poverty

Range from 8.1% (Harrogate) to 34.6% (Scarborough)

92,000 people in North Yorkshire
15% of the population

Households below 60% of median income (after housing costs), North Yorkshire MSOAs, 2013/14



The eleven most deprived neighbourhoods in North Yorkshire, 2015

The Index of Multiple Deprivation (IMD) is an area-based, relative measure of deprivation.

All are in the most deprived decile nationally for employment deprivation.

Nine are in the most deprived 10% nationally for the Income domain

Seven are in the most deprived decile for Health Deprivation and Disability.

Seven are in the most deprived decile for Education, Skills and Training Deprivation

LSOA Code	LSOA name (2011)	Ward containing LSOA	Rank of 42,844 LSOAs in England	Rank (NY)	Seven domains – national decile (1 is most deprived)						
					Employment	Income	Health Deprivation and Disability	Education, Skills and Training	Crime	Living Environment	Barriers to Housing and Services
E01027874	Scarborough 007D	Woodlands	313	1	1	1	1	1	3	8	3
E01027819	Scarborough 012B	Eastfield	318	2	1	1	1	1	1	7	3
E01027806	Scarborough 006B	Castle	319	3	1	1	1	1	1	1	5
E01027847	Scarborough 006D	North Bay	751	4	1	1	2	1	1	1	4
E01027804	Scarborough 010A	Castle	1,005	5	1	1	1	3	1	1	5
E01027817	Scarborough 012A	Eastfield	1,714	6	1	1	1	1	3	6	4
E01027907	Saibby 005C	Saibby West	2,057	7	1	1	2	1	4	9	5
E01027740	Harrogate 013F	Woodfield	2,283	8	1	1	1	3	4	7	6
E01027820	Scarborough 012C	Eastfield	2,515	9	1	1	2	1	5	6	6
E01027805	Scarborough 006A	Castle	2,561	10	1	2	2	2	1	1	8
E01027880	Scarborough 001C	Whitby West Cliff	2,792	11	1	2	1	4	2	1	5



Recommendation - support deprived areas

There are 11 Lower Level Super Output Areas (LSOA), out of 373 in the county, with Index of Multiple Deprivation scores (IMD 2015) amongst the most deprived 10% in England and a further 12 LSOA amongst the more deprived 10-20% in England. Many of these are located in the coastal town of Scarborough but they exist in other places as well.

The evidence indicates that interventions to increase income in these LSOAs will help to lift these away from the most deprived group. These might include supporting people into employment and better paid, more stable jobs; improving opportunities for in-work progression through skills training, and increasing uptake of benefits to which people are entitled. The changing face of work due to increased digitalisation, artificial intelligence and technology advances needs to be monitored to prevent adverse impacts on employment opportunities in the county.

Recommendation

North Yorkshire County Council, the Borough and District Councils should lead coordinated plans focused on areas of deprivation through collaboration with local communities and residents to reflect their priorities for reducing poverty and shaping healthy places.



Recommendation - tackle rural poverty

Rural locations are associated with transport issues, decreased access to services and opportunities, and fuel poverty. These concerns are especially challenging in a county with a high proportion of older residents. 43% of the North Yorkshire population live either in the countryside or in small villages with less than 4,000 residents. This compares with 6% of the population of Teesside or West Yorkshire. Rural poverty may often be hidden in the statistics. The integral links between the rural economy of North Yorkshire and that of neighbouring city regions of Teesside and West Yorkshire needs greater emphasis.

Recommendation

Local authorities in North Yorkshire should continue to advocate for an inclusive, vibrant and sustainable rural economy as integral to the local industrial strategies being developed by Local Enterprise Partnerships and City Region deals.

North Yorkshire County Council, the Borough and District Councils should consider developing a coordinated Rural Strategy that highlights rural-specific needs including employment, connectivity and affordable housing



Recommendation - reduce childhood inequalities

The impacts of prolonged austerity and cuts to welfare benefits have driven an increase in levels of childhood poverty. Children in workless families are especially at risk but many poor children are in families where parents work. Single parent families are particularly hit by welfare cuts.

Recommendation

All agencies working with children and families should be alert to the risk and impact of childhood poverty and ensure they take account of hidden and indirect costs that may hinder a child's full participation in the services they offer. Plans that are drawn up to support children and families should reflect this assessment and should include actions to mitigate the impact of poverty identified.

Actions may include support for managing household budgets, facilitating access to employment and training opportunities including provision for childcare, and signposting and making referrals to debt and benefits advice to maximise income where appropriate.

As part of the Joint Strategic Needs Assessment, North Yorkshire County Council and Clinical Commissioning Groups in North Yorkshire should undertake specific investigation into child poverty to provide an updated picture of the scale and distribution of child poverty across North Yorkshire to inform strategies and service delivery.



Recommendation - work with military families and veterans

Catterick Garrison is the largest military base in Western Europe, housing 6,500 service personnel in 2019. It is scheduled to expand to 9,000 service personnel from 2023. There are over 50,000 veterans in North Yorkshire. Lack of opportunities for spousal employment and the transition from military to civilian life can increase the risk of poverty. This is identified in the recent armed forces and veterans needs assessment. The new Ministry of Defence (MODs) Defence Transition Service (DTS) aims to support ex-armed service veterans as they transition into civilian life in North Yorkshire.

Recommendation

Military and related agencies should ensure that service and veteran-specific issues identified in the needs assessment are addressed.

All agencies should identify and train military service champions within their organisations to ensure that military veterans are not disadvantaged when accessing local services such as health and housing in keeping with the commitments of the Armed Forces Covenant.



Recommendation - create safe environments for high-risk groups

Deprivation and inequality can be concentrated in particular groups of people – such as those who are addicted to drugs; are homeless; have a disability; or experiencing mental ill health. Often these factors co-exist and place individuals at high risk for poverty and its negative consequences. Some families and individuals may have multiple interventions by different services which are not coordinated. Safe and stable housing is often a prerequisite for the targeted and individualised approaches that may be more beneficial for these groups compared to universal services which may not be sensitive to their multiple complex needs.

Recommendation

All agencies working with people with multiple health and social problems should consider a 'housing first' approach that provides a safe and stable environment which is sensitive and flexible to the needs and individual circumstances of the person.



Recommendation - develop priorities to mitigate the impact of changes to the benefit system

Navigating the benefits system is often challenging for people who are vulnerable. There are elements of how the system works including sanctions which causes loss of income at a time of greatest need. These sanctions appear to disproportionately target single parents, those with long-term health conditions or disabilities and keep people locked in poverty. The way in which the benefits system is operated at times has more in common with the workhouse than with the aspiration of Beveridge, that benefits should support people to live dignified lives. There appears little real evidence to support the notion that a harsh benefits regime will motivate people out of poverty. In fact, it appears to be having the opposite effect.

Recommendation

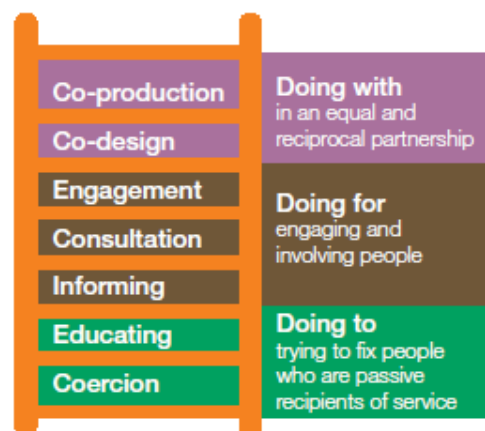
As part of the Joint Strategic Needs Assessment, North Yorkshire County Council and Clinical Commissioning Groups in North Yorkshire should undertake specific investigation to understand the impact of changes to the benefit system, cuts and sanctions on people, in terms of their mental and physical health and the use of services to set new strategic priorities in local plans to mitigate these impacts.



Recommendation - improve community engagement

Working with people and communities to create a shared future is more effective than doing things for them or to them. This principle is supported by a growing body of evidence that community participation leads to sustainable poverty reduction, especially where attention is given to training and building capacity in the community.

Poverty can undermine social networks and approaches that seek to build social capital in communities can increase the resources available to people to tackle the problems they face. The aspiration of working with communities is to design, reshape and deliver services equally with those who use them to create better outcomes.



Recommendation

North Yorkshire County Council, the Borough and District Councils should work with voluntary and community sector partners to strengthen the involvement of local communities in shaping plans for reducing the impact of poverty in areas of deprivation.

Actions may include identifying influential community members reflecting different perspectives; providing training and support for communities to develop local plans; and facilitating communities to work with relevant agencies to co-produce plans and services.

All agencies should identify or appoint community champions and senior sponsors to promote a culture of community engagement in their organisations.