**Social Determinants of Health and Health Inequalities in YOUR AREA**

**Introduction**

The social determinants of health (SDH) are non-medical factors which influence health outcomes. Key SDH include income, education and employment, but there are many others in addition to this[[1]](#footnote-2). There is a social gradient across the SDH, resulting in health inequalities where people in a lower socio-economic position have worse health outcomes.

As was highlighted by the Covid-19 pandemic, those living in the most deprived parts of the country face the worst health inequalities with regards to access, experience and outcomes of healthcare. Female life expectancy at birth in England is 7.9 years lower in the most deprived areas compared to the least deprived areas. For men, this gap is 9.7 years[[2]](#footnote-3). But when it comes to years lived in good health, the difference is even starker between richer and poorer areas: male healthy life expectancy in the most deprived areas is over 18 years lower than in the least deprived areas; for women this is almost 20 years[[3]](#footnote-4).

This briefing will analyse some of the key SDH and health inequalities in relation to YOUR AREA and concludes with recommendations for future research and practice.

**Health and Deprivation in YOUR AREA**

The health of people in YOUR AREA is worse than the average for England. Living an average of 76.6 years, men in YOUR AREA have a life expectancy 2.1 years below the national average. Women’s life expectancy in YOUR AREA is also lower than the national average at 81.4 years vs. 82.7 years respectively, giving a life expectancy gap of 1.2 years[[4]](#footnote-5).

YOUR AREA is ranked as the 81st most deprived place in England out of 317 Local Authority areas. Within Coventry, 14% (28 out of 195) of neighbourhoods (Local Super Output Areas) rank amongst the 10% most deprived areas in the country[[5]](#footnote-6). Many interconnected social and economic factors contribute to health experience, behaviours and outcomes in YOUR AREA, some of the most significant of which are explored in greater detail below.

**Key Social Determinants of Health in YOUR AREA**

**Income**

Income and health share a strong link, with health outcomes improving as income rises. Income also has a knock-on effect on many other SDH, for instance parental income affects children’s educational attainment. Low income is a key driver of deprivation and poor health in YOUR AREA; 31 (16%) of YOUR AREA’S LSOAs are among the 10% most deprived areas in the country relating to low income[[6]](#footnote-7). This includes those who are out-of-work and people on low earnings.

With regards to earnings, male full-time workers in YOUR AREA have median earnings of £34,873, which is slightly above the average for Great Britain (£33,592). However, female full-time workers in YOUR AREA have below average earnings (£26,153 compared to £28,332)[[7]](#footnote-8). Due to the high number of areas within YOUR AREA facing income deprivation as described above, we can assume that earnings will vary similarly between different parts of the city.

**Employment**

Employment is one of the most important SDH, with the long-term unemployed having lower life expectancies and worse general health than those in work. Children growing up in workless households are more likely to fail at all stages of education.

Unemployment rates are higher in YOUR AREA than the national average (5.4% vs. 4.1% respectively). Within YOUR AREA, 69.8% of adult females are economically active, compared to the national average of 74.7%. 79.9% of adult males are economically active, compared to a national average of 82.3%[[8]](#footnote-9).

**Gendered and Racial Health Inequalities in YOUR AREA**

Women and ethnic minority groups are disproportionately affected by socioeconomic deprivation, which in turn leads to poorer health outcomes. Research has argued for improved merging of area-based analysis on deprivation with that of intersectional inequalities[[9]](#footnote-10). The following paragraphs briefly explore the relation of gender and race to health inequalities in YOUR AREA and the UK more widely.

**Gender**

While women have longer life expectancies than men, they spend more of their lives in poor health. In line with the national average, in YOUR AREA females can expect to live almost a quarter of their lives in poor health (18.9 years) whilst males can expect to live just over a fifth of their lives in poor health (15.4 years)[[10]](#footnote-11). Further, research has shown that women experience poorer access, treatment and outcomes in many areas of healthcare. Despite these inequalities, however, data on women’s use of health and social care services is lacking, especially at local level.

**Race and Ethnicity**

YOUR AREA’S population is exceptionally and increasingly diverse, with 33% of people identifying as being from a Black and Minority Ethnic (BME) background compared to 14.4% of people in England generally[[11]](#footnote-12). Ethnic minority groups are more likely to be affected by socio-economic deprivation[[12]](#footnote-13), and as such they are more likely to suffer poor health and to report poorer experiences using healthcare. Research across different ethnic groups, however, is lacking. Structural racism has been shown to reinforce inequalities in areas such as housing, crime and employment, which in turn has a negative effect on health[[13]](#footnote-14).

**Conclusion**

YOUR AREA performs poorly in relation to other parts of England in key social determinants of health and there is wide variation in deprivation between different parts of the city. Cross-sector work is crucial for reducing health inequalities across YOUR AREA. Improved understanding of inequalities is needed at local level, particularly between different minority ethnic groups, men and women, and inclusion groups particularly at risk of poor health such as those seeking asylum and those in contact with the justice system.

1. World Health Organisation (Accessed Oct 2022) Social determinants of health (<https://bit.ly/3REfiYX>) [↑](#footnote-ref-2)
2. ONS (April 2022) Health state life expectancies by national deprivation deciles, England (https://bit.ly/3ebvJ1m) [↑](#footnote-ref-3)
3. Ibid. [↑](#footnote-ref-4)
4. Office for Health Improvement and Disparities (Accessed Oct 2022) Segment tool (<https://bit.ly/3M9kMKn>) [↑](#footnote-ref-5)
5. Gov.uk (Accessed Oct 2022) Indices of Deprivation 2015 and 2019 (<https://bit.ly/3ebx1JK>) [↑](#footnote-ref-6)
6. Ibid. [↑](#footnote-ref-7)
7. ONS (Oct 2021) Earnings and hours worked, place of residence by local authority, ASHE table 8 (<https://bit.ly/3EmfIAv>) [↑](#footnote-ref-8)
8. ONS (Accessed Oct 2022) Local area report – Nomis – official Census and labour market statistics ([www.nomisweb.co.uk](http://www.nomisweb.co.uk)) [↑](#footnote-ref-9)
9. Bambra, C. (May 2022) Placing intersectional inequalities in health (<https://bit.ly/3yhfhU4>) [↑](#footnote-ref-10)
10. ONS (Accessed Oct 2022) Local area report – Nomis – official Census and labour market statistics ([www.nomisweb.co.uk](http://www.nomisweb.co.uk)) [↑](#footnote-ref-11)
11. ONS (Accessed Oct 2022) Local area report – Nomis – official Census and labour market statistics ([www.nomisweb.co.uk](http://www.nomisweb.co.uk)) [↑](#footnote-ref-12)
12. Gov.uk (May 2022) Income Distribution ([https://bit.ly/3SZ31zn)](https://bit.ly/3SZ31zn%29) [↑](#footnote-ref-13)
13. BMJ (Jan 2021) Mitigating ethnic disparities in Covid-19 and beyond (<https://bit.ly/3T7ecpV>) [↑](#footnote-ref-14)