North Lincolnshire Council

NORTH LINCOLNSHIRE HEALTH & WELLBEING STRATEGY

2025 - 2035

HEALTH & WELLBEING BOARD

ONE NORTH LINCOLNSHIRE

THE ‘**ONE** NORTH LINCOLNSHIRE’ APPROACH

Welcome to the North Lincolnshire Health and Wellbeing Strategy. We take a ‘One North Lincolnshire’ approach, where everyone must play their part to improve health and wellbeing, including people living in our communities, our local organisations, our voluntary organisations and local businesses.

Today, in parts of North Lincolnshire, people struggle with preventable health conditions for many years of their life and, as a result, die much earlier than they should. By working together as One North Lincolnshire, we know that we can collectively make a positive impact and improve the health and wellbeing of our communities, adding life to our years and years to our life.

This strategy focuses on building health and wellbeing, collaboratively, with communities, the voluntary sector, public sector, and private sector, for every person living in North Lincolnshire.

We talk about disease, illness, and disability as a means of understanding the causes (and the causes of those causes) of low levels ofhealth and wellbeing. The causes of illness and disease are complex, interrelated, and multifactorial. To achieve our ambitions, we must all, in partnership, work together and stay committed to making positive impact.

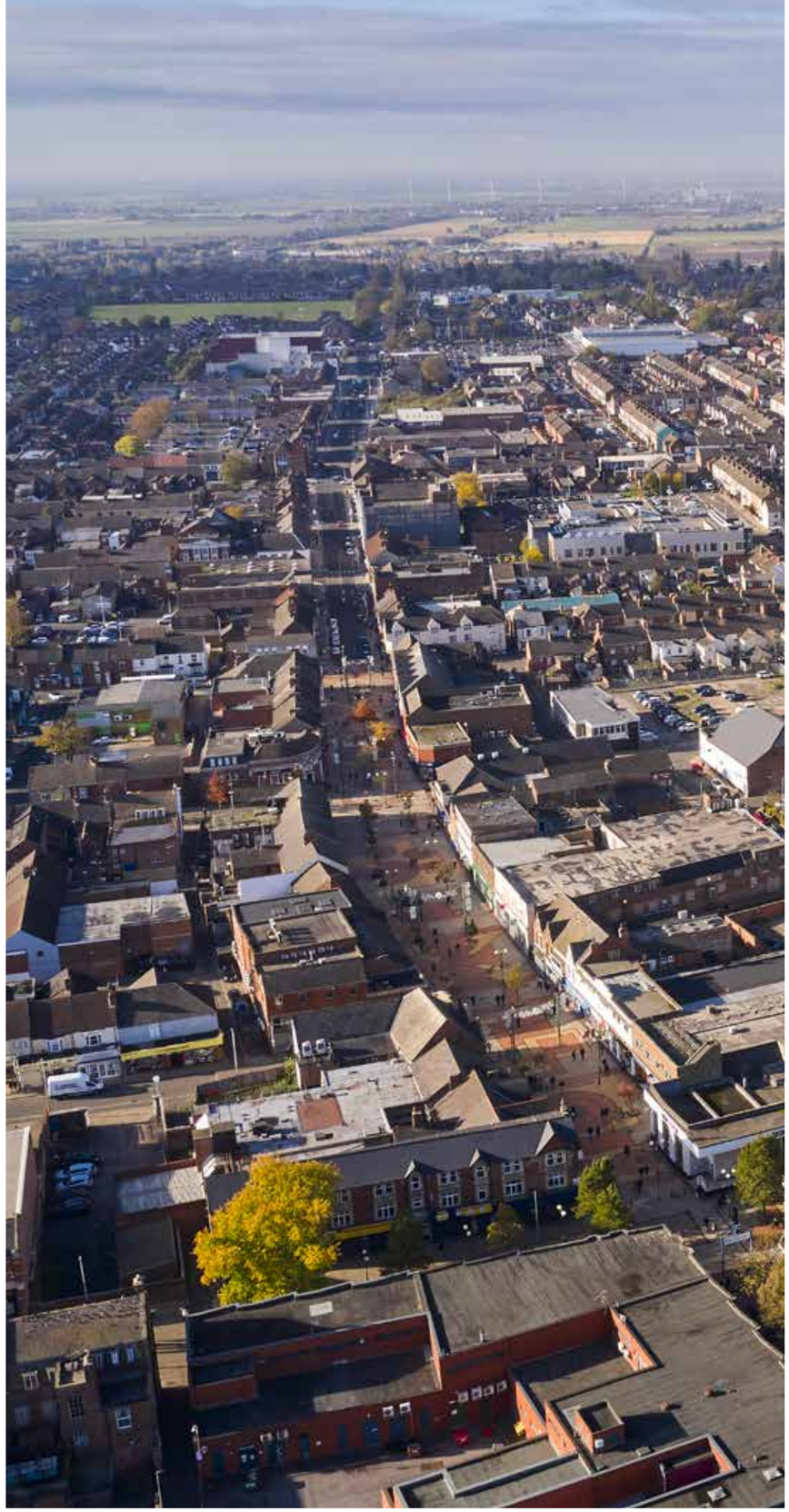
THE ROLE AND PURPOSE OF THE NORTH LINCOLNSHIRE HEALTH AND WELLBEING BOARD

The role of the North Lincolnshire Health and Wellbeing Board is to:

- Provide leadership to enable and influence everyone to work together as One North Lincolnshire to increase our health and wellbeing.
- Identify, assess, and monitor the health and wellbeing of everyone in North Lincolnshire, ensuring that people who experience multiple disadvantages are considered.
- Develop priorities and ensure that these are addressed across all policy areas to ensure that everyone in North Lincolnshire has strong foundations for health and wellbeing.

It provides a forum for One North Lincolnshire Health and Wellbeing Board working and allows focus on the health and wellbeing challenges that are faced by people living in North Lincolnshire.

The Health and Wellbeing Strategy is one of many strategies in North Lincolnshire. It provides direction and areas of focus to enable collaborative decision making that will support our collective ambitions. This strategy aligns with the Integrated Care



and Community First strategies, as well as the operating model of North Lincolnshire Council and the Community Frame. **Health and Wellbeing Board Members** are **jointly responsible** for the strategy and take an **active** role, ensuring that the areas of focus are **considered within their organisations, action plans are developed**, and that **progress is monitored and evaluated internally.** The Health and Wellbeing Board reviews progress against the agreed ambitions, acknowledging the complexity and long-term nature of achieving our ambitions.

The Health and Wellbeing Strategy is informed by the Joint Strategic Needs Assessment (JSNA). Over the next ten years, the JSNA will inform actions in each area of focus, and will be published in a new, interactive and engaging format, on the 'One North Lincolnshire' webpages.

DEVELOPMENT OF THE STRATEGY

This strategy has been developed by North Lincolnshire Health and Wellbeing Board members and their teams, with involvement from children and young people, and our Experts Together partnership.

We have:

Reviewed and synthesised engagement: existing engagement with our communities has been built on, through groups like Experts Together and Youth Council, to identify the health and wellbeing priorities of people in North Lincolnshire.

Used existing and new data analysis: both new and existing data analysis and insight has been combined to tell the story of health and wellbeing in North Lincolnshire, informing this strategy.

Review of current strategies in North Lincolnshire: current strategies have been reviewed to ensure that gaps are identified and addressed in this strategy.

Shared findings and priorities: working with partners as One North Lincolnshire has meant a better understanding and focus areas that reflect collective knowledge.

This approach has created an informed, collaborative, and targeted strategy that addresses specific challenges while ensuring alignment with broader initiatives and priorities.

IMPROVING HEALTH AND WELLBEING IS AS EASY AS 1... 2... 3... 4!

Despite the title of this section, we know that achieving our ambitions will not be easy. The only certainty we have is the complexity of the challenge that we face.

The North Lincolnshire Health and Wellbeing Board have one vision, two ambitions, three areas of focus, and four principles to guide us in our work.

One vision

Thriving people and place.

Two ambitions:

1. Narrow the gap in healthy life expectancy by 2030 and continue to narrow this gap to 2035.
2. Increase healthy life expectancy by five years by 2035.

Three areas of focus:

1. Create healthy places to live, grow, and play.
2. Improve the health and wellbeing of women and children.
3. Improve the experience of ageing.

Four Principles:

1. Designing for equity, acting boldly, with love.
2. Evidence informed.
3. Community focused.
4. Remembering unique experience.

ONE VISION: THRIVING PEOPLE AND PLACE

There are so many things that affect our health and wellbeing. Together, we must build solid foundations that enable us all to thrive. These foundations are known as the building blocks of health and wellbeing, and include;

- Job security and fair pay
- Quality housing
- Nourishing food
- Good transport connections
- Access to green space
- Receiving a quality education
- Feeling safe, and
- Feeling connected to our friends, family, and communities

For some of us living in North Lincolnshire, these building blocks are missing from our lives or are not as strong as they could be. This leaves gaps in the foundations of our health and wellbeing, and results in many of us suffering with preventable disease and illness, reducing the number of years we can live independently. It also means that many of us die before we should.

The Health and Wellbeing Board will work together to ensure that North Lincolnshire provides a healthy physical, social and economic environment for all. From easy access to healthy food and promoting the benefits of breastfeeding from birth, to ensuring that housing standards encourage rather than inhibit health, and access to green space and valued employment are available to all. Our 'One North Lincolnshire' partnership approach ensures that we work collaboratively with our communities and people living in North Lincolnshire to make a difference to people's lives.

TWO AMBITIONS

We have two ambitions that we share with the Integrated Care Strategy for Humber and North Yorkshire. This alignment of ambition will ensure that our collective efforts to achieve our vision in North Lincolnshire will contribute to the ambitions of the region.

1. Narrow the gap in healthy life expectancy between the highest and lowest levels in our communities by 2030 and continue to narrow this gap to 2035.

2. Increase healthy life expectancy by five years by 2035.

These ambitions focus on overall improvement in health and wellbeing, as well as reducing health inequality, seen in gaps in healthy life expectancy between geographical areas, and other characteristics like gender and ethnicity.

Measuring health and wellbeing is challenging. Attempting to measure health takes us into discussion about what it means to be healthy, and whether this is achievable for all of us. Wellbeing for one person is also often very different to wellbeing for another person. We are left with measuring disease, or absence of it. Defining something by what it isn't (like defining health and wellbeing through absence of disease or disability) ignores lots of the complexity and subjectivity involved in our experience of our health and wellbeing.

We will develop a framework for measuring outcomes that incorporates the lived experience of people in North Lincolnshire. The framework will be used to ensure that we collectively achieve our vision: thriving people and place.

This is where **social love**[1] comes in. Taking a socially loving approach to decision-making will enable us all to pursue our own health and wellbeing goals, without judgement or assumption, enabled by the social environment that we live in. What is healthy life expectancy?

Healthy life expectancy is defined by the World Health Organisation (WHO) as the 'average number of years that a person can expect to live in "full health" by taking into account years lived in less than full health due to disease and/or injury'[2].

Put simply, healthy life expectancy gives us the average number of years that someone living in North Lincolnshire **can expect to live their life independently, free of preventable disease or disability**. It also shows the average time that people can expect to live with **more reliance on outside support**, from family and friends, or local services.

In North Lincolnshire, during the ten years leading up to the Covid-19 pandemic, improvements in life expectancy stalled, and healthy life expectancy declined. Since the start of the pandemic, healthy life expectancy has begun to improve, and the gap in life expectancy between people living in the most deprived and least deprived areas of North Lincolnshire has reduced for women. The Health and Wellbeing Board will continue to build on this momentum and ensure that residents in North Lincolnshire live long lives in good health.

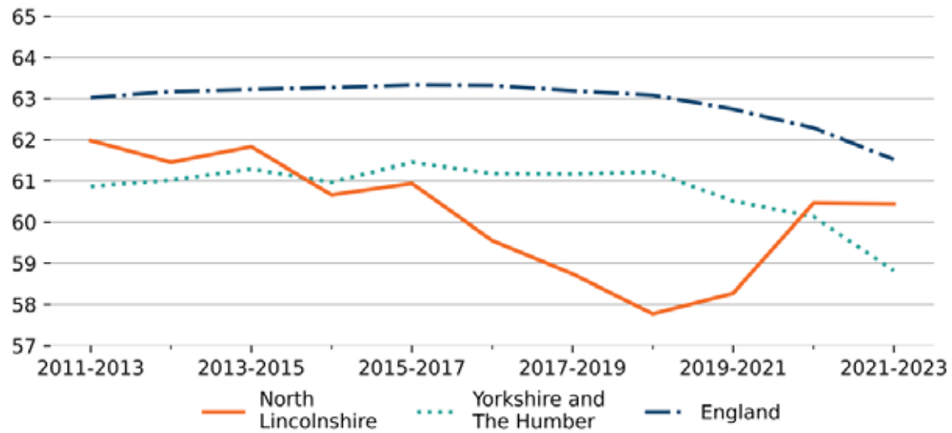
1 What's love got to do with it? Exploring social love and public health - RA Forbes, R Crossley, A Stevens, R James, M Black, CR Foster, E Such, 2024

2 https://www.who.int/data/gho/indicator-metadata-registry/imr-details/66

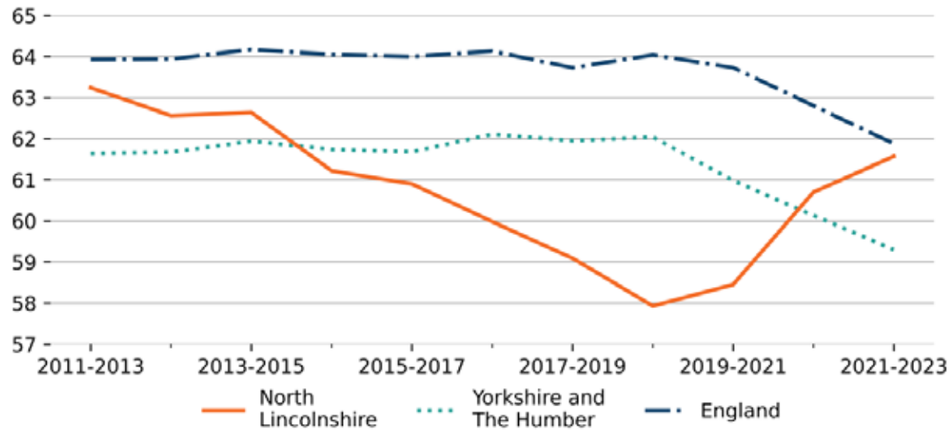
Indicator	Scunthorpe	North Lincolnshire	Yorkshire and The Humber	England
Healthy life expectancy (Males) (2021-2023)	unavailable	60.4	58.8	61.5
Healthy life expectancy (Females) (2021-2023)	unavailable	61.6	59.3	61.9
GP appointments per 1,000 patients (Sept 2024)	563.0	554.6	527.8	472.4
Patients saying they had a good experience contacting their GP on last occasion (%) (2024)	65	68	68	67

Note: Healthy life expectancy data is at Local Authority level. Each Built Up Area has been matched to its respective Local Authority based on geographic area share.

Healthy life expectancy (Males) (2011 -13 to 2021-23)



Healthy life expectancy (Females) (2011 -13 to 2021-23)



Source: ONS, 2024

THE CHALLENGES & CAUSES

CHALLENGES

Challenges

Healthy Life Expectancy (the years of our lives free from illness, injury, or disability) is low.

Levels of preventable illness are high.

People are dying before they should.

MEDICAL CAUSES

Medical Causes

Heart Disease

Covid-19

MSK

Stroke

Depression

Diabetes

Respiratory Disease

Trachea Bronchus & Lung Cancer

Dementia

Falls

For many years, we have collectively focused on the medical causes of our public health challenges with little positive change. Evidence shows that we must dig deeper to address the causes of these medical causes, and the causes of those causes (and so on) to really improve health.

FACTORS

Risk Factors

Food and Nutrition

Alcohol

Physical Inactivity

Smoking

These risk factors have previously been seen as 'behavioural' and individual choice.

It is now widely accepted (backed by peer-reviewed evidence) that these risk factors have influences outside of individual control.

Added Complexity

Healthy options are often less convenient. This means that making the healthier choice is not easy. The healthy choice often needs more resources (time, money, equipment). The more resources we have, the easier it is to make the healthier choice. This creates inequality.

Inequalities in health and wellbeing hurt us all.
The shakier the foundation, the more likely it is that people will experience poor health and life outcomes.

This graphic has been produced using data from sources like fingertips, ONS, and the global burden of disease tool (2021). The terminology has been simplified for our purposes, combining terms like 'high BMI' and 'high blood sugar' into 'food and nutrition' and exemplifying the importance of physical activity in both of these factors.

THE CHALLENGES AND PREVENTABLE CAUSES

The strength of our foundations (the building blocks of health) contribute to the inequalities that we see in health and wellbeing. This adds complexity when we try to achieve our vision of thriving people and place. Each risk factor has previously been seen as 'behavioural' and down to individual choice. There is now overwhelming evidence that the strength of our foundations for good health and wellbeing affects our options and ability to choose.

Strong foundations mean more resources, and more mental freedom to make choices that will improve our health and wellbeing, enabling us to thrive; whilst foundations that need strengthening can limit the options available to us and restrict our ability to choose. If we don't have access to transport, for example, and we are struggling to make ends meet, our choices are restricted by affordability as well as accessibility. We are reliant on what is available nearby, often meaning that we must purchase cheaper foods with a long shelf-life. These foods are often ultra-processed with low nutritional value. These foods are harmful to our health in many ways, including through raising our blood sugar levels and stimulating storage of sugar as fat (leading to high BMI).

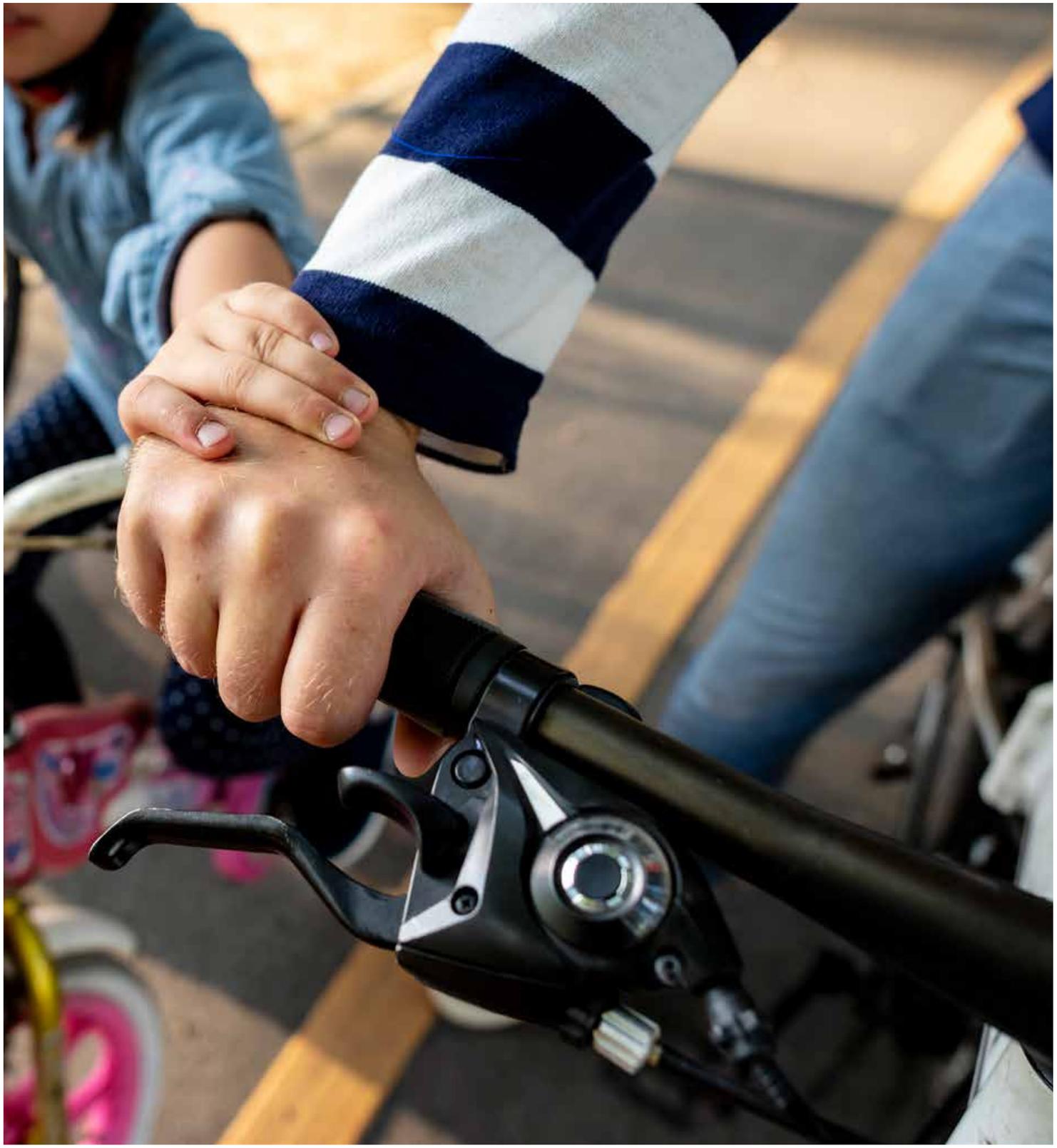
The restrictions on our options and choices are then further complicated by the influence of big industry, like the tobacco and food industries. Industry is important for our health and wellbeing. It offers employment, purpose, and enables independence. Despite this, industry can also harm us. We want to work with big industry to reduce harm and maximise health and wellbeing. For example: supermarkets often encourage people to buy and eat their products through multi-buy and discount offers. We want to see these offers on nutritious food, rather than ultra-processed, and high, fat, salt, and sugar foods. This would enable people in North Lincolnshire to eat nutritious foods more affordably.

We also want to protect children and young people in North Lincolnshire from harmful advertising and marketing from all industries, including the gambling and tobacco industries, which often use attractive, colourful marketing techniques that feature cartoon characters and 'fun' names, even for things like vaping equipment and flavours.

THREE AREAS OF FOCUS

All three areas of focus: create healthy places to live, grow, and play, improve the health and wellbeing of women and children, and improve the experience of ageing, are interconnected. Each will impact another in various ways. The challenges facing us are complex and we must work differently to address them.

Whilst these are our focus areas for the next ten years, within them, there are many different elements for action and change. Developing our action plans must be an iterative process, and we acknowledge that we can't do everything at once. Working together as One North Lincolnshire, we may develop different action plans for areas that impact the areas of focus in this strategy.

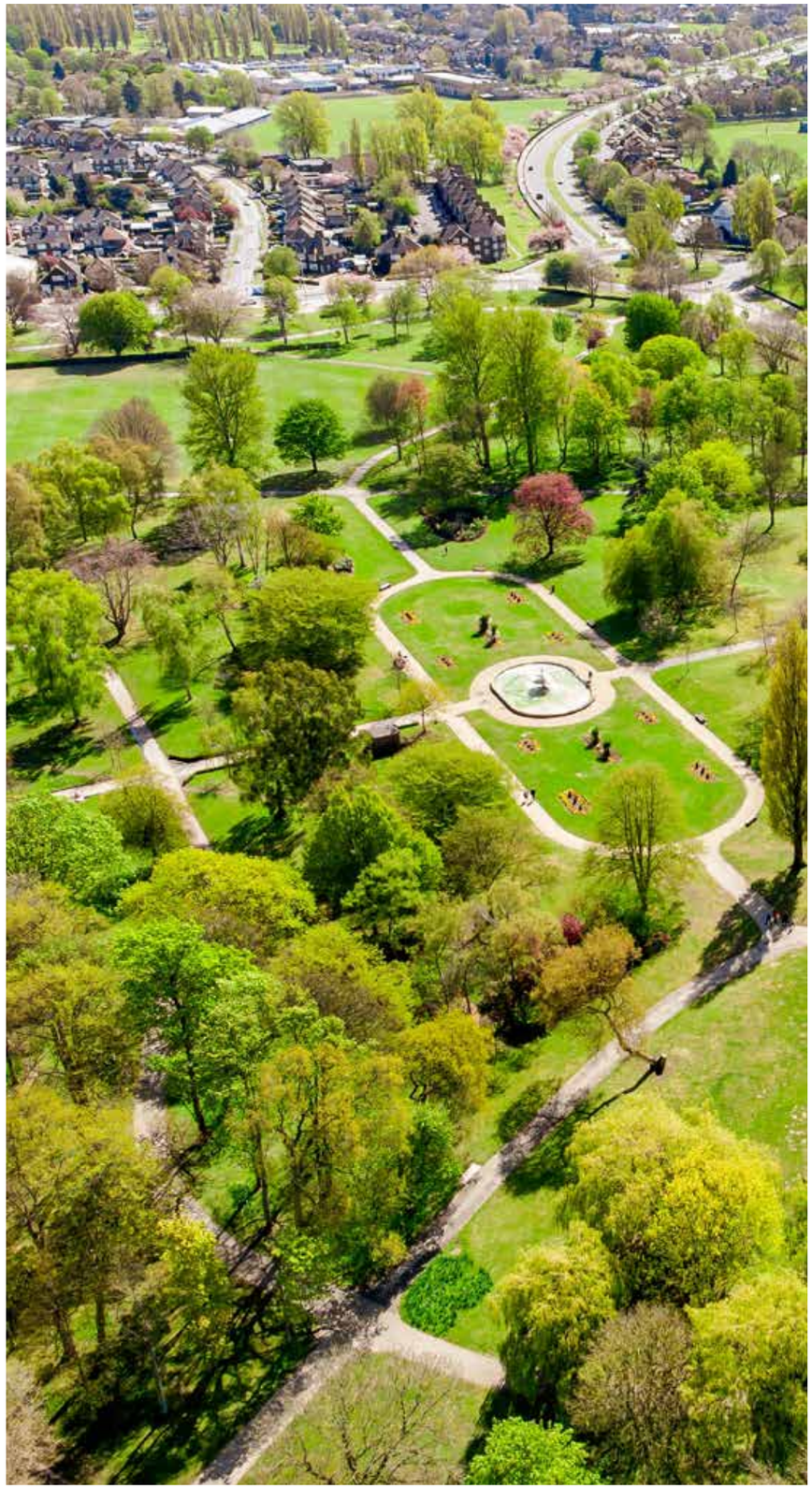


1. CREATE HEALTHY PLACES TO LIVE, GROW, AND PLAY, WHERE EVERYONE THRIVES

Our health and wellbeing is influenced by where we live. Our surroundings, the quality and security of our homes, our access to transport, the quality of the education we can receive, and our access to green space, sport, and leisure facilities all affect our health and wellbeing and whether we can thrive.

Access to places where we can safely play, as both adults and children, and where children and young people are celebrated, valued, and supported to grow in a way that ensures the future of our communities, is essential to creating a thriving place. Our communities hold a huge amount of knowledge, and enable us to access support and advice, as well as solidarity, friendship, and meaning. Knowing that we are not alone in life and the challenges that we face is a huge part of feeling safe and well.

Creating healthy places to live, grow, and play can enhance quality of life, promoting both independence and development of a support network that increases access to opportunities and resources for maintaining good health and wellbeing.



In some areas of North Lincolnshire, residents feel unheard. The challenges they experience with antisocial behaviour, crime, and unsafe roads can undermine creation of community and support networks.

Safe, secure, and suitable housing is more than just a basic need; it is a foundation for physical and mental wellbeing. Poor housing conditions — such as damp, overcrowding, instability, or lack of accessibility — are directly linked to a range of health issues, including respiratory illnesses, stress, anxiety, and delayed recovery from illness or injury. Good quality housing can promote independence, support recovery, and enable people to live healthier, more fulfilling lives.

Addressing these challenges by working with people who live in North Lincolnshire and enabling them to create places where everyone can thrive is essential to ensuring we can all thrive and enjoy the benefits of a high quality of life.

2. IMPROVE THE HEALTH AND WELLBEING OF WOMEN AND CHILDREN

We must enable positive early-life experiences for children and young people in North Lincolnshire, while eliminating adverse childhood experiences. Over her lifetime, a woman's health has profound consequences for subsequent generations. Poor maternal health is associated with low birth weight, diminished cognitive development, lower school success, and lower levels of adult health and productivity [4].

If we want healthy children and less intergenerational hardship – we must support their mothers.

The needs of women have not been met by society or the healthcare system for many years. Women face persistent barriers in seeking health care and preventing disease, including gender discrimination, lack of education, and domestic violence. Women who experience severe and multiple disadvantage (like living in areas of high deprivation, being from a global ethnic majority background, experiencing domestic abuse, having a history of adverse childhood experience or trauma, using substances, being homeless, are younger), often face complex challenges that negatively affect their health and wellbeing, increasing the risk of poor health outcomes[6].

Why must we focus on women's health?

The answer is simple: improving women's health and wellbeing improves the health and wellbeing of everybody (including men).

Men were treated as the "medical norm" until 1993, and many prescription drugs were withdrawn from the market between 1997 and 2001 with eight of these posing "greater health risks for women". Women face a statistically significantly higher risk of injury in car accidents compared to men, largely due to the crash test dummies used in the driver's seat being based on male anatomy, with a smaller dummy used in the passenger seat. Equipment and safety gear is designed for men, with women struggling to find appropriate safety gear that fits, is comfortable, and relatively inexpensive.

Women's menstrual cycles, reproductive pain, menopause symptoms and conditions like endometriosis recur monthly or over years. These cause measurable absenteeism and reduced productivity. Male biology lacks any similar high-frequency condition affecting work or daily life to the same degree[7] [8].

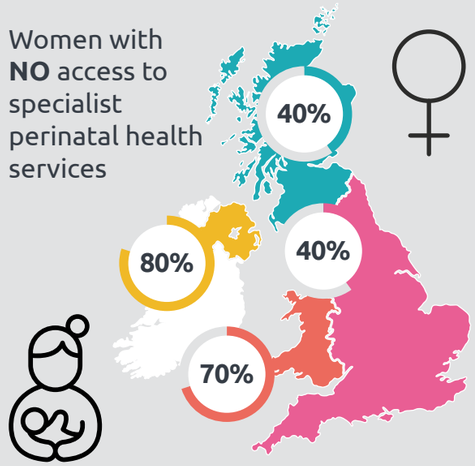
4 Economic Benefits of Investing in Women's Health: A Systematic Review
5 Economic Benefits of Investing in Women's Health: A Systematic Review
6 Building capacity and wellbeing in vulnerable/marginalised mothers: A qualitative study - ScienceDirect
7 Women's reproductive health conditions
8 Endometriosis UK diagnosis survey 2023 report March.pdf

1. If we care about public spending – we must care about women's health

- Women are disproportionately affected by domestic and sexual violence. These experiences drive long-term health harms and present major barriers to accessing care safely. ***1 in 4 women*** in England and Wales will experience domestic abuse in their lifetime[9].
- **Perinatal mental illness alone costs the UK £8.1 billion a year**, mostly due to preventable impacts on children and lost productivity[10] [11] [12].
- Chronic underdiagnosis of things like endometriosis, autoimmune conditions, and long-COVID leads to higher emergency admissions, more repeat appointments, and more claims for financial support, for example: endometriosis diagnosis in the UK takes on average 8 years and 10 months, delaying effective treatment and causing extended pain, lost income and career setbacks[13].
- There has been a steep rise in adult diagnoses of neurodiversity in women, especially those of peri-menopausal age, indicating a misunderstanding of neurodiversity presentation in girls. The most common age for diagnosis of ADHD in females is late 30's to early 40's, whereas for males, this is age 7. This could be due to higher social demand for masking in female children.

Fixing this means **fewer demands on the NHS, the department of work and pensions, and social care.**

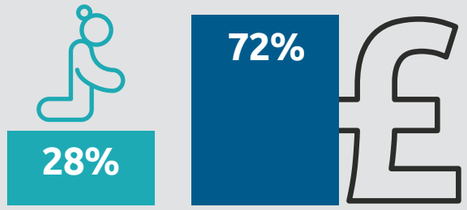
Women with **NO** access to specialist perinatal health services



Suicide is the leading cause of death for women during pregnancy and in the year after giving birth

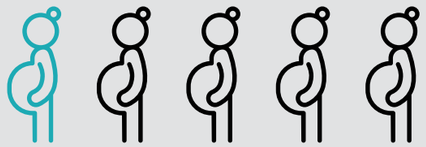
Cost to the public sector of perinatal mental health is **5 times** the cost of improving services

Of these costs..



relate to the mother

relate to the child



Up to **20%** of women develop a mental health problem during pregnancy or within a year of giving birth

2. If we want more people in work – we must invest in women's health

- Women make up **almost half the UK workforce**, yet poor reproductive health, chronic pain, and menopause symptoms push thousands out of work each year[14].
- Women take on the majority of unpaid care. They are more likely to work in low-paid or part-time jobs—limiting access to care, increasing stress, and affecting long-term health. *Women retire with a 35% lower private pension pot on average*[15].

3. If we want healthy children and less intergenerational hardship – we must support their mothers

- Children's health, school readiness, and future life chances are **directly tied to their mother's health.**
- Children with unwell or unsupported mothers are more likely to:
  - Miss school
  - Develop behavioural and emotional problems
  - End up in social care or criminal justice services

4. If we care about reducing pressure on GPs, A&E, and adult social care – we must treat women earlier

- Most chronic illness starts in working-age women - but gets ignored or delayed.
- **Women are more likely to be prescribed antidepressants than investigated for pain.**

This means that they show up later, sicker, and cost more to treat. This is system inefficiency caused by a lack of understanding, not biology. It is preventable.

If we do not focus on women's health, not only will we collectively *pay more for worse outcomes,* we will also embed inequality in the next generation.

If we prioritise it, everyone wins, and we improve outcomes across the whole population—economically, socially, and systemically.

This strategy must put the health of women and children where it belongs: at the centre of local wellbeing.

9 https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimcharacteristicsenglandandwales/yearendingmarch2023

10 Costs of perinatal mental health problems - Centre for Mental Health

11 costsofperinatalsummary.pdf

12 Failure to fully address mental health problems in pregnancy and following childbirth costs over £8 billion, report finds | Maternal Mental Health Alliance

13 Endometriosis UK diagnosis survey 2023 report March.pdf

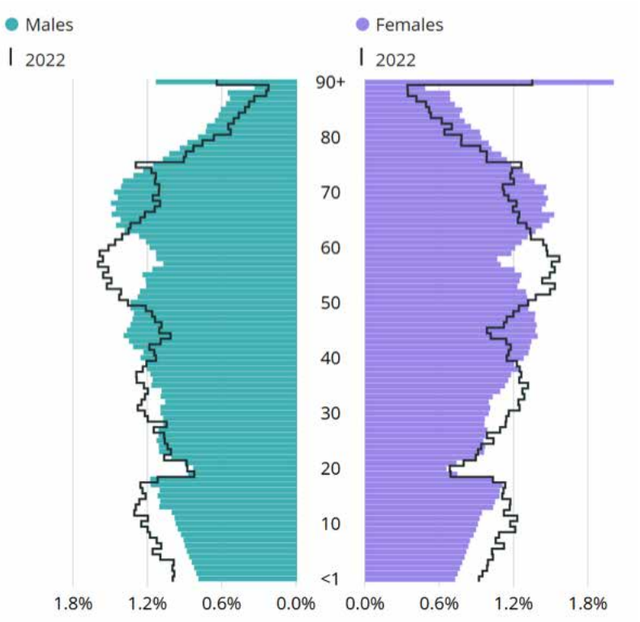
14 https://www.fawcettsociety.org.uk/menopause-report

15 https://www.pensionspolicyinstitute.org.uk/

3. IMPROVE THE EXPERIENCE OF AGEING

North Lincolnshire has an ageing population. At the end of this strategy period (2035), it is projected that there will be more people living in North Lincolnshire aged over 65, and less people under age 20, compared to 2022. These changes mean that it essential for us to improve the experience of ageing.

Projected population age structure by single year of age and sex for North Lincolnshire, 2022 to 2035[16]



16 Subnational population projections for England - Office for National Statistics

We want North Lincolnshire to be a great place to grow old. People living in North Lincolnshire want to be independent, enjoy their family or friends and be able to get to the places they want easily. Together, as One North Lincolnshire, we want to enable supportive and inclusive communities where everyone can thrive and maintain their independence in their own homes and communities for as long as possible.

This will help everyone living in North Lincolnshire to help themselves and become connected parts of their local area.

Our health and social care services were not designed to work in isolation, and we must establish clear ways of assisting people back into the support of their community when they no longer need medical intervention. The value of our communities in improving and increasing wellbeing must not be underestimated, and investment must be made to enable this.

We will need to think outside the box, building on our assets and working with our communities to set policy that will drive change. All organisations involved in this strategy have made this commitment, including our voluntary organisations. Local services must be there to help people when they need it, in a whole-person focused way that ensures consideration of our unique life experience.

Addressing the risk factors that we have identified in this strategy is essential to reducing the risk of disease and medical conditions in later life. Enabling a wide range of opportunities throughout life for people living in North Lincolnshire to be creative, active, socially connected, well-nourished, and happy, will lead to fulfilling lives that are healthier for longer. To do this, we must get the basics right. This includes ensuring good quality housing; excellent standards of education; increasing skills and employability; good transport links and availability of nutritious food.

FOUR PRINCIPLES

The 'One North Lincolnshire' approach recognises the importance of everyone playing their part to improve health and wellbeing. To help us to work together, the North Lincolnshire Health and Wellbeing Board has developed some uniting principles for every organisation and individual who is part of 'One North Lincolnshire' to work to.

1. Designing for equity, acting boldly, with love

Every decision that is made by organisations in North Lincolnshire – public, private, voluntary, and community – affect the health and wellbeing of everyone who lives here. It is essential that we all consider equity in our decisions, policies, processes, and procedures, and that we do so while valuing and appreciating everyone in our communities in a socially loving way.

Social love is an asset-based way of thinking about the people and communities within North Lincolnshire, providing a new lens to the decisions that we must make together, as One North Lincolnshire. We must improve the wellbeing of everyone in North Lincolnshire and we must protect and enhance our 'place' - including protecting our environment. Social love involves care, respect, commitment, knowledge, responsibility, trust, and remaining open and receptive to new ideas and different ways of

thinking. A socially loving approach, applied to decision making and policy setting, considers the above, and ensures that everyone in North Lincolnshire is fully able to pursue their own health and wellbeing goals, without judgement or assumptions, enabled by effective social policy. As 'One North Lincolnshire', we must **embrace** the social environment that we all live in.

2. Evidence informed

Using evidence to make our decisions is key to our success. We value evidence from many sources, including from our communities and from peer-reviewed academic sources.

3. Community focused

Our communities in North Lincolnshire are one of the main creators of health and wellbeing. We often think of the NHS when we think of health, but by the time we get to the most parts of the NHS, there is already an issue that we need help with. Community, and the other building blocks of health and wellbeing, is essential if we want to increase the number of years that we live in good health (adding life to our years) and if we want to ensure that we do not die before our time (adding years to our life).

The strength and trust that exists in our communities is the key to improving health and wellbeing and must be at the heart of this strategy.

4. Remembering unique experience

The things about us, like our age, gender, ethnicity, sexuality, economic status, where we live, and our health and wellbeing, interact with each other in many different ways, creating experiences of privilege, disadvantage, or a mix of both. The interactions between the things about us make our experiences unique, for example: being close to retirement age will interact with looking for work, as it may be more difficult to find secure employment (this would further interact with living in a rural location without access to transport). This interaction between the things about us and the things we experience in life is called intersectionality.

National research shows that a relatively small number of people live extremely complex lives. These people potentially have more than one medical condition that they need treatment for. They may have to juggle multiple medical appointments at different locations on different days, perhaps with no access to transport, and limited networks or resources to support them. They may have social care needs as well as healthcare needs, and may need support to get into employment, education or training. They might need mental health support and may find managing their health a full-time job. They may also be supporting other people – for example, as a parent or carer. Recognising these challenges, complexities, and unique experiences is essential to making positive changes in health and wellbeing in North Lincolnshire. Working with those who need it most can enable huge improvements in independence and personal outcomes, increasing quality of life.

We recognise the challenges set out in this strategy and together, we will ensure that North Lincolnshire thrives. It might not be as easy as 1, 2, 3, 4, but through the Health and Wellbeing Board and our partnerships developed across One North Lincolnshire, we dedicate our efforts to making a difference where it matters - in our communities.

Getting involved

The health and wellbeing board is a public meeting. We would love to see you there. The dates of future meetings are published on the One North Lincolnshire website, and you may submit questions to the board prior to the start of the meeting.

ONE NORTH LINCOLNSHIRE

North Lincolnshire Council