

# *Health and Wellbeing in Devon*

## **Joint Health and Wellbeing Strategy for 2013-2016 Summary**

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### **Introduction**

Key representatives from health and social care in Devon have formed a Health and Wellbeing Board, to improve health and wellbeing and reduce health inequalities among people and communities in Devon.

Every aspect of our lives has an impact on our health and wellbeing: from health services through to our environment, housing, employment, education, transport and our involvement in local communities. This means that it is in all of our interests to improve our health and wellbeing, whilst respecting people's personal lifestyle choices. The role of the Health and Wellbeing Board is to make sure that organisations that provide health and social care in Devon focus on improving people's health and wellbeing, and measure their progress.

The Board has agreed to have a focus on families, lifestyle choices, and maintaining independence in older age. It has carried out a consultation on some proposed priorities, and given local residents and organisations the opportunity to influence these priorities.

The Board welcomes your views on the first draft of its Joint Health and Wellbeing Strategy, which it has developed in response to local need, and feedback from individuals and organisations.

### **What does health in Devon look like?**

Devon has an older population than nationally, with peaks in people aged 60 to 64 years of age and aged 85 and over. It is predicted that the population will increase by 20% in 2033 with greatest growth in older age groups. The county attracts nearly 6 million visitors a year.

Devon is the third largest rural county in England and one of the most sparsely populated. The largest groups in Devon are residents in isolated rural communities and residents of small and medium sized towns with strong local roots. 3.4% of the population are from non-white ethnic groups and 3% from other white groups.

In Devon there are areas that are amongst the poorest in the country and some which are amongst the most wealthy. Devon's rural areas are generally poorer than rural areas elsewhere in England, and rural areas around some market towns are more deprived than the town itself.

There are over 7,000 births in Devon each year. Life expectancy is above the national average, with shorter life expectancy in North Devon, particularly in the towns of Ilfracombe and Bideford.

In 2009 there were 8,160 deaths in Devon, of which 2,237 were below the age of 75. In the under 75s coronary heart disease, lung cancer and cancer of the digestive system were the most common causes of death, followed by breast cancer, strokes and accidents.

## **Devon's Health and Wellbeing Priorities**

We've looked at people's health and care needs across Devon through what's called a JSNA (Joint Strategic Needs Assessment), and taking a 'life course' approach, identified some initial priorities. Public consultation has helped us refine and shape these priorities, which now form the basis of our strategy for the coming year. Based on evidence and improvements made, these priorities will challenge and span organisational responsibilities, and will be reviewed and refreshed annually.

### **PRIORITY ONE: A Focus on Families**

Including families needing targeted support, teenage health, issues around under achievement/low aspirations pre-school and at primary/secondary transition. Specific priorities are **poverty, targeted family support, domestic and sexual violence and abuse, education outcomes, and transition from children's to adults' services.**

### **PRIORITY TWO: Lifestyle Choices**

The importance of people taking personal responsibility for their health, to prevent future ill-health - including in teenagers. Specific priorities include **alcohol, contraception and sexual health, screening services for cancer and other conditions, exercise, physical activity, healthy eating and smoking and high blood pressure.**

### **PRIORITY THREE: Independence in Older Age**

Older people: including those with dementia and the challenge of helping them to live independent lives longer. Specific priorities include **falls prevention; support for people with dementia and carers support.**

### **PRIORITY FOUR: Social Capital and Building Communities**

Developing community co-operation: including neighbourliness, family support and personal responsibility. Specific priorities include the **home environment, social support, offender health, and housing.**

The Board will expect the organisations that commission these various services to show the actions that meet these priorities in their own plans.

**To see the full Joint Health and Wellbeing Strategy, or for more information about the Devon Health and Wellbeing Board, please visit [www.devonhealthandwellbeing.org.uk](http://www.devonhealthandwellbeing.org.uk).**