

NHS Bristol, North Somerset and South Gloucestershire Integrated Care Board

Bristol Health and Wellbeing Board

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Title of Paper:	Multiple Disadvantage Strategic Objectives
Author (including organisation):	Katherine Williams – Bristol City Council
Date of Board meeting:	25 th May 2023
Purpose:	Oversight and assurance

1. Executive Summary

Bristol's Changing Futures programme committed to developing a Multiple Disadvantage Needs Assessment and Strategy for the City, as a key vehicle for achieving long-term, positive, sustainable change and impact for people experiencing multiple disadvantage.

The definition of multiple disadvantage (MD) is people who are experiencing three or more combinations of the following: homelessness, substance misuse, mental ill-health, criminal justice involvement, domestic abuse.

We will present the key findings from our work which include furthering our understanding of: The scale of MD in Bristol

The complexity and impact of MD

The demographic profile of people facing MD

We will also discuss how members of the H&WBB can play a role in supporting the recommendations within the strategy against the following strategic objectives:

Objective 1: embed service and system improvements for people experiencing three or more MD needs, including a new approach for those with the highest levels of acuity, to transform the support they receive, reduce inequalities, and improve people's lives.

Objective 2: intervene earlier at all stages of the life course, taking a trauma-informed approach, to reduce the incidence, duration and impact of MD.

Objective 3: Strengthen and embed co-production with people with lived experience of MD, so that their diverse voices and expertise continue to influence positive change.

Objective 4: Improve data on MD, so we have a 'whole system view' of people's diverse and intersecting needs and strengths, to drive earlier intervention, influence policy, and deliver truly person-centred support.

Objective 5: Continue to work in partnership, building our collective skills, capacity, leadership, and resilience, to achieve cultural and system change.

2. Purpose of the Paper

Part of this work is about awareness raising as we develop our understanding of multiple disadvantage, the connections to trauma informed approaches, helping us take a person centred view and addressing inequalities in terms of access and outcomes.

We are seeking commitment from the Health and Wellbeing Board to take an active role in improving how systems work for vulnerable people. We would welcome creativity from board members to explore the opportunities to influence and embed learning.

3. Background, evidence base, and what needs to happen

No single agency 'sees' the whole person and the system does not 'see' or understand the whole person, or equalities and intersectionality. We lack 'whole system' data. We will present data from the needs assessment and hear from people with Lived Experience of MD to establish the evidence base and next steps. Headlines include:

- There is a strong evidence base that demonstrates MD has a significant and lasting impact on people's lives
- The impact is felt disproportionately, with gender, age and ethnicity imbalances
- The inter-generational nature of MD is striking
- There is a higher prevalence of brain injury, autism and learning difficulties amongst people experiencing MD which effects engagement with services

4. Community/stakeholder engagement

The strategy has been developed with the involvement of people with lived experience of MD, commissioners, and service providers, and overseen by Bristol's MD Transformation Board, and Changing Futures Programme Board. As part of this we will be delivering our H&WBB report with people with lived experience of MD.

5. Recommendations

To be developed.

6. City Benefits

This work directly highlights the disproportionate impact that MD has on some of the more vulnerable citizens in our city.

7. Financial and Legal Implications

Include if applicable.

8. Appendices

Slides to be presented. MD Strategy to be circulated.