

How building trust can help tackle health inequalities



Drawing on recent work in Edmonton, North London, Nicola Steuer discusses how building trust could be one of the most impactful, and cost-effective, opportunities available to Integrated Care Systems as they look to tackle health inequalities.

How do you reduce demand on A&E and shift to a more community-based, preventative health system?

North Central London Integrated Care Board recently set out to explore this theme in Edmonton. But not by asking the question directly.

Instead they asked, ‘What helps people and communities in Edmonton to live a healthy life?’ ‘What really matters to you about your health and wellbeing?’, and ‘How can we work more collaboratively with communities to help address health inequalities?’.

The driver for these questions was high demand on acute services. But by approaching the problem through open and deliberative conversations, they started to understand some of the roots of the problem, rather than just the presenting issue.

Here are some of the key themes that emerged:

- It is services that are hard to reach, not people. Community members were happy to talk openly. They told us they are willing to play their part in supporting their own wellbeing and preventing ill-health. But they go to A&E because they don’t know how to access other services or face barriers to doing so (e.g. language).
- Wider determinants have a huge impact on people’s everyday life experience, as well as their health outcomes. For example, when a group of young people was asked to name the main health issues affecting their peers they said ‘crime-related stress’, ‘isolation’, ‘my parent’s anxiety’, ‘depression and anxiety with the standards of today’, ‘drugs’, ‘school and work’, and ‘eating unhealthily’. If we do not address people’s day-to-day circumstances, we cannot expect to improve their health.

- To address health inequalities, we must build trust between service providers and communities, particularly marginalised and minoritised communities. This is about listening to diverse voices, to people's lived experience, and to communities' ideas for change. Service providers also need to recognise and harness the power of community-based, informal solutions. Friends, family and community networks play a powerful role in people's health and wellbeing.



Graphic created by [New Possibilities](#).

Bringing people together

So how to make this happen? Listening and building trust can only happen if the right people come together. This means being thoughtful about where, when, and how opportunities for collaboration are created.

In Edmonton, New Local worked alongside community organisations, [Edmonton Community Partnership](#) and [Healthwatch Enfield](#), on the design of the programme. Their strong local knowledge and networks meant that they could identify where targeted activity would be needed, for example with specific population groups, and the engagement methods that would work well.

Over 150 people took part in sessions in a range of venues including a voluntary sector hub and a local theatre, and online. We had both daytime and evening sessions. We put a huge amount of thought into how each session was designed to allow all participants to really hear each other, identify common ground and share solutions.



Health inequalities are everyone's business

We started with the premise that addressing health inequalities is everyone's business, not just the responsibility of health professionals. On that basis we brought together residents from several local communities, including young people, people with disabilities and people from racially marginalised and minoritised communities, as well as voluntary and community organisations, council officers and members, and local NHS organisations.

In addition to the engagement workshops, Edmonton Community Partnership designed more creative engagement opportunities. These included making a [video](#) with young people and writing and performing a play involving members of the Bulgarian Gypsy Roma and Traveller community.

It takes dedicated time and resource to build trust with communities experiencing the greatest inequalities. But the financial and social return on investment is an opportunity Integrated Care Systems cannot afford to miss.

From moments of engagement to ongoing collaboration

The depth and scale of the conversations in Edmonton produced a range of ideas and proposed solutions. Yet there was one overarching sentiment: health inequalities will only be solved by people working together.

One-off moments of consultation are not enough. We need opportunities that enable people and organisations to come together, first to build trust and then to collaborate and take action on a consistent basis.

It takes dedicated time and resource to build trust with communities experiencing the greatest inequalities. But the financial and social return on investment is an opportunity Integrated Care Systems cannot afford to miss.

How to build trust to tackle health inequalities Cross-sector priorities in Edmonton

Ongoing community conversations which bring together residents, the VCSE, and public sector

These will contribute to building shared understanding, trust, and sense of ownership of local services. These events should be frequent, accessible, held in different venues and formats and feed directly into regular service level feedback.

Longer term voluntary, community and social enterprise (VCSE) partnerships and resourcing VCSE organisations play a critical role in expanding the reach of the public sector. They have often already built trust with diverse communities and can help reduce barriers to collaboration and healthcare access. They are key to any genuinely integrated care system.

Shared accountability

Recognise that health inequalities cannot be addressed by healthcare providers alone. Build on the strength of the ‘working together’ sentiment to identify the respective actions that public sector organisations, VCSE organisations, and people and communities can all play to help reduce inequalities.

Taking action

Engagement and collaboration are the basis for building trust but this must be followed by action. Local NHS partners should select one thematic priority that would benefit from collaborative action and implement a test and learn approach.

Better equip professionals

If we want NHS and public sector professionals to work with people and communities in new ways, we need to equip them to do it well. We should prioritise training, developing, and supporting staff in active listening, empathy, and different forms of engagement.