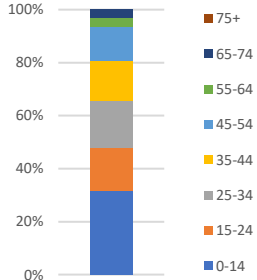


Inclusion Health Groups: Rushmoor

Key:
National data = dark blue
UTLA data = light blue
TLTA data = orange

Inclusion health is a 'catch-all' term used to describe people who are socially excluded. People in inclusion health groups frequently suffer from multiple health issues.

Gypsy, Roma and Traveller communities

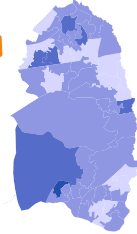


Lowest life expectancy of any ethnic group

High rates of...

- Maternal & infant mortality
- Mental illness & suicides
- Diabetes & heart disease

0.17% of the population (2011 Census)



Hospitalisations peak at:

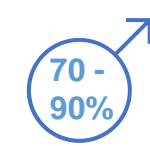
- 0-4
- 20-24
- 60-64
- 75-79

People experiencing homelessness

8 people 2018
Won't include hidden homelessness
1.7/1000 in temp accommodation

- Mental health** 1/3 have attempted suicide
- Substance use** Cause of 1/3 deaths
- Low life expectancy** 70.5% of hospital admissions were emergencies

91% UK nationality



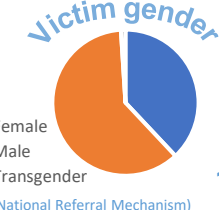
91% aged 26+
Emergency hospital admissions



Victims of modern slavery



Most **2020** cases were **labour exploitation**



There were also sexual, criminal and domestic

1/3 unknown age

54% aged 18-29
17% aged 30-39
16% aged below 18

But... Child Criminal and Sexual Exploitation not included

Children most often used for county lines

Victims often work in **everyday roles**

e.g. nail bars, agriculture, car washes & construction

Hampshire Constabulary cases have remained stable since 2017

- Methods of control:
- Physical abuse
 - Financial control
 - Tied accommodation
 - Monitoring

People in contact with the Justice System

0 prisons

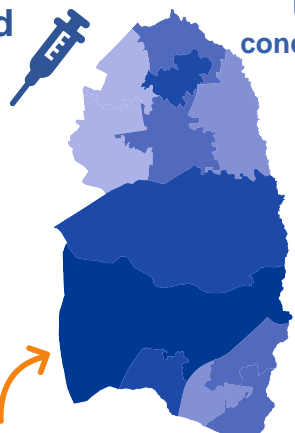
- Health needs are linked to
- Early **childhood** experiences
 - Smoking and alcohol/**substance use**
 - Deprivation** and exclusion
 - School absence and low **educational attainment**

People with drug and alcohol dependency

People released from prison/hospital have a **lower opioid tolerance** so have high chances of overdosing

Alcohol risks:

- Liver disease, diabetes, cardiovascular disease
- Unemployment, homelessness and relationship breakdown

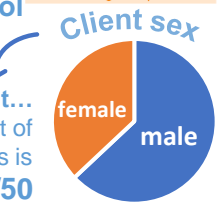


Inclusion clients

Urban concentration

55% structured clients use opiates
40% unstructured clients use alcohol

54% of people in treatment live in the **30%** most deprived areas



But... gender split of successful outcomes is **50/50**

Sex workers

People engaged in sex work
2/3 adult services ads are aged 18-29



1 **TULIP clinic**
Consensual vs. non consensual different health outcomes

1/5 no nationality recorded
More nationalities advertised online than in people engaged in sex work in real life (**32 vs 4**)
Changed to suit potential customers

- Health outcomes:**
- Mental health
 - High potential for STI transmission
 - Substance use & homelessness

Coastal communities

0% of the population

Veterans

37,400 working age veterans in Hampshire and IOW

- Health conditions related to arms, hands, legs, feet, back and neck
- Elderly veterans – hearing and sight loss
- Smoking
- PTSD and mental health
- Social isolation & loneliness

90%
Health needs differ between veteran generations

Vulnerable migrants

since 2016

40% NINo registrations were for people aged **25 - 34**

No bridging hotel
Dynamic population moving often
Unaccompanied children arriving have specific needs

PTSD is underdiagnosed

Language barriers can cause issues accessing healthcare

1/3 experience anxiety or depression

2020/21 NINo registrations

7 Syrian nationals
57 Afghan nationals
319 overseas nationals

Health checks on arrival

- TB
- Hep B & C
- Anaemia
- Vit A & D deficiency
- Smoking
- FGM
- Mental health