

A Chatter That Matters: A Conversation About Severe and Multiple Disadvantage

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Health Opportunities Team (HOT) are a community-based charity committed to improving the health and wellbeing of young people (aged 12-25). HOT received funding by Lankelly Chase to facilitate a conversation about severe and multiple disadvantage. This came following a report by Hard Edges Scotland which highlighted the complexity of the lives of people facing severe and multiple disadvantage in Scotland, and how this impacts public and voluntary services. Severe and multiple disadvantage can be described as any person with two or more of the following issues: homelessness, offending, substance misuse, mental health issues and poverty (Fisher, 2015).

In 2019 HOT facilitated an after-school workshop where young people from the local areas of Craigmillar, Portobello, Liberton and Gilmerton shared their experiences and views on severe and multiple disadvantage, specifically around health and poverty. The aim of this was to explore how young people feel severe and multiple disadvantage impacts upon their lives and families, especially in relation to health and wellbeing, and to explore how organisations like the Health Opportunities Team can develop services that mitigate the impacts of severe and multiple disadvantage.

Activities were planned with the aim to identify and explore three main questions:

- What do young people think the health impacts are for young people living in poverty?
- Why do young people think poverty impacts health?
- What can health agencies (such as Health Opportunities Team) do to mitigate the impacts of poverty?

The aim of the first activity was to explore the young people's understanding of health, poverty and the impact poverty has on health inequalities. Young people were allocated groups and were asked to explore the meaning of these words/phrases within their groups. The chart below represents the young people's answers. Overall, they had a good understanding of poverty and health. They were then encouraged to think

about the language that we use to discuss poverty and health in Scotland. One young person spoke about being 'scaffy', and how 'scaffy people have poorer health'. The majority of the group agreed with this, but a few pointed out that words like 'scaff' can make people feel ashamed, embarrassed or bullied.

As a wider group, we discussed what young people could do to prevent people living in poverty being bullied or shamed because of their socioeconomic status. Being kinder, more grateful and 'to think what it would be like to walk in that person's shoes' were recommendations made by the group.

What is Poverty?	What is Health?	How does Poverty Impact Health?
- Limits Opportunities	- How well you are	- Limited access to sanitary products
- Low income	- Lifestyle	- Can't access shampoo/toothpaste
- Poor	- Dental Health	- Limited knowledge or education on how to be healthy if poor
- People go without	- Medicine and Prescriptions	- People may feel embarrassed about their health or financial situation
- Limited access to healthcare	- Addictions	- More likely to be struggling with addiction
- People are unhappy	- Weight/obesity	- Can't afford things that richer people can
- People with disabilities are more vulnerable	- Pollution	- Pollution can be bad for breathing and cause problems for people
- Ready meals	- Illness	- People can't afford healthy food so become ill
- Addiction	- Diet	- Stress/worry of being poor impacts mental health
- Homelessness	- Smoking	- Dirty or limited clothing
- Food Banks	- Mental Health	- Difficult to access services that can help
- Worse Health	- Life Expectancy	- Gyms/Swimming too expensive
- Shame and Embarrassment	- NHS	
- Higher Crime Rates	- Emotional Health	
	- Relationships	
	- Media	
	- Where you live	

- Bullying	influences health	
- Unemployment	- Exercise	
- Less Food	- Mind/Body/Soul	
- People Claim Benefits	- How you feel	
- Low Self-Esteem		

The second activity aimed to explore to what extent young people agreed with statements about poverty and health. In their groups, they were asked to comment on 10 different statements and discuss the reasoning for their answers.

Statement 1: Do you think that where you live determines how healthy you are?

Of 15 young people, 11 believed that health is significantly influenced by the environment. One young person explained that 'some environments are unhealthy, polluted and unclean. If you live in area where you are exposed to needles or a lot of factories with fumes this could affect your health'. Another described the difficult choices many people with financial constraints face: 'McDonalds or ready meals are cheaper and easier to make. You don't need to know how to cook to eat those foods although they are more unhealthy'. It was evident through our discussions that access to food and safety for people were their main concerns. As a result of the stress or worry of physical violence, young people expressed concern that higher crime rates in deprived areas have a detrimental effect on the individual's physical and mental health and wellbeing.

Rural and urban living conditions were discussed, with the majority of young people agreeing that it is healthier for people to live in the countryside. One group held the view that as there is easier access to services in cities, there is a higher concentration of people living in cities. As a result, they believed there are more people in the city who experience difficulties with substance use or homelessness than in rural areas. There were a few young people who disagreed with this viewpoint and argued that many people living in rural areas can still experience substance misuse difficulties or homelessness.

Statement 2: Is poverty an issue in Scotland?

All workshops attendees agreed that poverty is an issue in Scotland. They shared the view that wages are not sufficient, thus forcing people into poverty. Evidence of this, as pointed out by one young person, is the increase in the utilisation of food banks across Scotland. A group of young people at the workshop explained that there are certain areas in Scotland that are more deprived and are therefore more likely to have poorer health and an increase in social issues: Glasgow, Dundee and certain parts of Edinburgh (Craigmillar, Muirhouse and Wester Hailes). One group described the poverty they had witnessed in the City of Edinburgh including homelessness, people wearing unclean clothes and using drugs. The young people said that when they witnessed this, they were frightened, worried and grateful for what they had. To minimise poverty in Scotland, they believed they were somewhat powerless as young people did not receive an income and could not contribute financially to their households. There was a general consensus amongst the group that the government should be held accountable for poverty levels in Scotland.

Statement 3: Are women more likely to live longer than men in Scotland?

14 young people believed that women were more likely to live longer than men in Scotland. One group indicated that physical violence puts women in a more vulnerable position in deprived communities. However, the group pointed out that men are more likely to be involved in violence (e.g. knife crimes) that may result in an increase of premature deaths.

Furthermore, it was noted that lifestyle choice between the sexes differ. One young person explained that certain high-risk jobs are still largely male-dominated, stating 'men are more likely to work on oil rigs or do labouring jobs such as mechanics or scaffolding that brings more risks than stereotypical female jobs'.

The differences between men and women seeking medical attention was discussed. Many of the young people held the view that women were more likely to seek medical attention or help if they required it than their male counterparts. One group of young people at the workshop argued the point that transgender or non-binary people may have a different experience of seeking medical attention due to fear of embarrassment, stigma or shame.

Statement 4: Limited access to food negatively impacts health

All of the young people agreed that limited access to food negatively impacts health. One young person explained that household income influences health as this determines how much food can be bought. However, another stated that recently people with jobs have been struggling to provide food for their families because the minimum wage is so low. Several shared worries about this, saying that having no food worries them and having access to free food at school and in the local community is really important.

One group argued that limited access to nutritious food could cause malnutrition in people, which subsequently could cause the onset of health conditions such as diabetes, heart failure and cancer. One young person said 'I know loads of people who are either too skinny or too heavy and they all have breathing issues or heart problems. This is really worrying because I don't want to end up like that'. Another shared their experience of food poverty saying 'food is something that we take for granted. I'm glad I get school dinners and that there is breakfast club in the morning because I would be hungry at school otherwise'.

One young person also believed that crime rates would increase in areas where there was limited access to food, stating 'if people need to eat and can't afford to buy food then they will turn to anything to get money which may result in them stealing, selling drugs or sex'. Within the group, drugs were discussed, and the majority agreed that substance use was 'a way to cope with how difficult life is'. One young person shared their experience of living in Niddrie: 'there is loads of drugs here and poverty here. I have friends who are always hungry, and their parents are on drugs. I don't know why adults do that'.

Statement 5: Encouraging young people to walk, cycle and play is a good thing

All of the young people agreed that young people should have the opportunity to be active. One group described the benefits of being active at a young age, such as the prevention of illness and disease, stating 'if you move and are active you are more likely to be a healthy weight and have less health issues'. However, some young people did not believe it was easy to be active. One young person shared their experience: 'everyone tells you that you should exercise even though it can be boring.

I hate gym at school because the boys don't let us play but there is little else in the community to do that's fun and isn't embarrassing to go to'. Another young woman shared her experience: 'I used to play and do loads of sports when I was younger but now I'm a teenager I'm embarrassed to exercise in front of boys because they always think we are rubbish or take the mick out of us'.

Statement 6: It is easy to access gyms or fitness groups in my local community

13 young people agreed that it was not easy to access gyms or fitness groups in their local community. One person shared their frustrations that age restrictions and limited financial resources restricts them from going to gyms, saying 'it costs too much and I'm under 16 so I can't sign up to anything, which is annoying'.

All of the young women in the workshop stated that embarrassment or lack of knowledge of what to do at the gym or a health centre prevented them from going. The young men did not share this view. The young women agreed that having 'women only' groups are good, but they aren't always accessible: 'I would go to a girls' group but I can't afford to. Even if it was free then I'd have to ask my nana for bus fares to get there'. One young person suggested that 'schools should be teaching us how to keep active and fit without needing the use of a gym'.

Statement 7: Health is something that we can control

10 young people held the view that health cannot be controlled. Several agreed that there are preventative actions that people can take to improve and maintain their health. However, there will always be an element of our health that we cannot control. 'Yes, we can eat healthy and exercise but there are some things that you can't control, and health is one of them. Every year I get a cold. I can't control that', one young person stated. Another said, 'I do think that people that come from nicer areas can afford to be healthier than me, but they also can get ill'. Furthermore, lifestyle was taken into account with a young person stating 'I know old people who have smoked for years and they are healthy but there are people who eat well and don't smoke and they've got loads of different illnesses and take loads of medication. I don't know if we can always prevent illness'.

5 young people were unsure if health could be controlled but believed that DNA determines our health and we cannot control the DNA we have.

Statement 8: Money is something we can control

All of the attendees agreed that money cannot be controlled. A young person stated that the job market is becoming more difficult: 'nowadays you need good grades and qualifications to get a semi-decent job. Not everyone is academic but still has the skills to do a job. I think they set people up to fail'. Many of the young people agreed that education was important to 'escape poverty'. As demonstrated by one young person 'coming from Craigmillar, the high school is minging and not a nice place to be. They need to give us an environment that motivates us and give us teachers who make us feel good and not judged. You can tell that some of the teachers have no clue what it feels like to live here'.

Statement 9: Accessing healthcare (e.g. going to the doctor) is easy

All of the young people held the opinion that healthcare can be difficult to access. Waiting lists and difficulty getting an appointment were the main issues raised. One person shared her experience of having anxiety and depression 'I went to my GP to be referred to CAMHS a year ago and I am still waiting to see somebody. I think if I were to begin cutting myself or behaving badly they would see me, but it's like because I am not a visible problem, nobody cares'. Another shared their distress at phoning their GP 'the GP often has all waiting times and then they ask you loads of questions which can be quite embarrassing'. All of the young people in the group felt that dental care should be free as part of the NHS, just as prescriptions and other aspects of healthcare are.

Statement 10: Do people treat others differently according to their health or wealth?

All of the workshop attendees agreed that people are treated differently according to their health or wealth. One group believed that not wearing fashionable or branded clothing makes people stand out which may result in bullying. As described by a

young person at a local high school in South East Edinburgh 'you can tell the poor people from the more well-off ones because of the trainers and school bags'.

Many of the young people believed that healthcare staff can be prejudiced and treat people differently impacting on the patient's quality of healthcare. One young person spoke about 'feeling stupid' and 'looked down on' because they did not understand what the doctor was telling them, and the doctor looked 'frustrated'. Fear of being judged, embarrassed or shamed was a major factor young people believed influenced people's experience of health agencies. One young person pointed out 'if people have negative experiences with healthcare staff or centres, they're less likely to go back. Professionals have to think about how they are treating people'.

Invisible disabilities were also discussed. A young person from Portobello said that 'people may not realise that someone has a disability. My cousin has a learning disability and sometimes people treat her as if she is stupid because they don't realise she doesn't always understand'. Another young person described what it was like to be dyslexic and dyspraxic 'I'm not that great at reading so, if a doctor gives me something to take home, I start to panic and won't ask any more questions'.

The aim of the next activity was to encourage young people to think about the top reasons they feel poverty impacts health. They were split into groups of three and presented their reasons. During this task, they were also asked to talk about why they think it is important to talk about the impact poverty has on health.

Top reasons poverty impacts health:

Group 1 Poverty impacts health because, without money, people do not have the same opportunities to do things that would improve health or prevent disease.

Group 2 Poverty impacts health because it is difficult to access information about health when there is limited money.

Group 3 Poverty impacts health because limited money/resources can cause stress/worry.

Conclusion

The workshop provided an insight into the lived experiences of young people who have witnessed or experienced severe and multiple deprivation. The results were shared with internal and external stakeholders. Colleagues attended an event to discuss the results with public and private sector agencies from different areas of Scotland with the aim of learning how HOT could meet population needs

References

Fisher, G., 2015. The complexity of severe and multiple disadvantage. *London: Synthesis and Lankelly Chase.*