

What is inclusion health?



1. What is Inclusion Health?

Inclusion Health is an approach that aims to address the health and social inequalities experienced by socially excluded populations, specifically targeting those who face overlapping risk factors for poor health. People within Inclusion Health groups may be dealing with major life challenges, such as homelessness, substance use, or discrimination linked to their background. As a result, they typically experience far worse health outcomes than the general population and often have a much lower average age of death.

At its core, Inclusion Health is about ensuring everyone- regardless of their circumstances- has a fair and equal opportunity to live a healthy life.



2. Who does it help?

Inclusion Health helps people of all ages who are socially excluded and face multiple barriers and disadvantages to accessing healthcare, such as those:

- Experiencing homelessness, including sofa surfers, those in hostel and temporary accommodation (on average someone sleeping rough dies 30-40 years earlier than the general population)
- Struggling with addiction
- Are vulnerable migrants or refugees, including asylum seekers
- Gypsy, Roma, and Traveller communities (estimated to live 10 to 25 fewer years than the wider population)
- Sex workers
- In prison or recently released, under probation (termed as those in the justice system)
- Victims of modern slavery.



3. Why is it important?

- People in inclusion health groups often have many health problems at once from overlapping risk factors (such as poverty, violence, and complex trauma).
- They may not get help until things get really bad. For example, people experiencing homelessness use about four times more acute hospital services than the general population.
- They face barriers to accessing support like not having identification, not speaking English well, if English is not a first language, or afraid of being judged.
- They may not have a permanent address, can be transient and easily excluded from screening programmes, vaccinations, and follow up health and care appointments.
- Early help can save lives and reduce pressure on emergency services. For example, almost a third of people experiencing homelessness who go to the emergency department go there for food, safety, and shelter.
- Improving the health outcomes for those people in inclusion health groups benefits the system as a whole: it can reduce A&E waiting times and delayed hospital discharge, it

improves access to primary care, and focuses on getting individuals the appropriate support, reducing inequalities.



4. What can we do about it?

Here are some of the actions we can take to support those in inclusion health groups:

- Make services easier to access (e.g. walk-in clinics, outreach teams, ensure communication is available in a range of languages and is easy read when needed).
- Train staff to understand and support these groups better.
- Listen to people's experiences and involve them in designing services.
- Be mindful of record keeping and recording any reasonable adjustment that may support appointment attendance. For example, support contact details, who their key worker might be, ethnicity recording and language spoken.
- Integrate services, such as working together across housing, social care, and charities. For example, Greater Manchester have a tripartite agreement between their combined authority, NHS provider organisations, and housing providers. They work towards the integration of housing and health by co-locating services and training frontline health and housing workers.
- Use data to track progress and improve care.
- Trauma informed and trained staff who are culturally competent.

Here's a more tailored breakdown of actions you can take in your role, whether you are working on the frontline, or in a team leader or strategic role:



5. What can you do if you're working in a frontline role?

If you work on the frontline, you play a crucial role in supporting Inclusion Health. Here's what you can do:

1. **Be welcoming and non-judgemental**- treat everyone with respect and kindness, no matter their background. Build trusting relationships and avoid making assumptions about people's lives or choices by taking a personalised approach to their health, care and support needs, and being person-centred.
2. **Make services easier to use**- help people register with a GP even if they don't have ID or proof of address. Offer walk-in appointments or flexible times where possible. Use interpreters or translated materials for people who don't speak English well. Be mindful of digital exclusion and possible low literacy level in your communication with people. Make reasonable adjustments.
3. **Understand trauma and its impact**- many people in Inclusion Health groups have experienced violence, abuse, or loss. Use a trauma-informed approach: be patient, listen carefully, and avoid pushing people to share more than they're ready to.
4. **Spot hidden needs**- look beyond the immediate health issue- ask gently about housing, food, safety, or mental health.
5. **Provide information in accessible formats** in case of low or no literacy and offer discreet support with form filling.
6. **Be aware of cultural stigma** around conditions, for example men's mental health in Gypsy Roma Traveller communities.
7. **Consider patient/resident preferences**, for example gender of clinician.
8. **Checking individuals are registered with a GP and dentist** and helping them to register and access them when they are not.
9. **Work together**- link people to local support services like housing, food banks, addiction support, voluntary sector and faith groups who support inclusion health groups or legal and welfare advice, so they have joined-up care.
10. **Keep learning**- take part in training on Inclusion Health, cultural awareness, and trauma-informed care. Learn from colleagues, community groups, and people with lived experience.



6. What can you do if you are a team leader or in a strategic role?

If you're in a more strategic role, you have the opportunity to shape systems, policies, and practices that make Inclusion Health part of everyday practice. Here's what you can do:

1. **Make Inclusion Health a priority**- embed it in strategies, local health and wellbeing plans, Joint Strategic Needs Assessments, policies and pathway design, and commissioning frameworks. Set clear goals within these, ensuring there are measurable targets to reduce health inequalities for excluded groups.
2. **Use data to drive change**- identify gaps by looking for missing data on groups like homeless people or migrants. Improve visibility by working with partners to collect better data and include these groups in health monitoring and reporting.
3. **Commission inclusive services**- fund services that are flexible and easy to access, culturally appropriate, trauma-informed, and designed with input from people with lived experience. Commission single point of contact housing and health referral service, or strengthen an existing service to better holistically serve people who experience social exclusion.
4. **Build strong partnerships**- work across sectors to create joined-up support, and work to shared outcomes. Consider neighbourhood health in place-based working and think about working across all sectors.
5. **Explore 'one stop shop' models**, drop-in clinics with no appointment times.
6. **Support the workforce**- provide training on trauma-informed care, cultural competence, understanding the needs of Inclusion Health groups. Encourage reflective practice and staff wellbeing.
7. **Make yourself aware of community outreach services** that serve the needs of inclusion health groups and exploring collaborations with these.
8. **Involve people with lived experience**- include them in service design, decision-making, and evaluation. Pay them fairly and value their input.
9. **Influence policy and practice**- challenge exclusionary policies and advocate for national and regional support for Inclusion Health priorities.
10. **Monitor and share impact**- use toolkits like the Core20PLUS5 framework and the NHSE Action on Inclusion Health framework to track progress, and share good practice and learning across systems.

Further reading:

- A national framework for NHS- action on inclusion health, NHS England: [NHS England » A national framework for NHS – action on inclusion health](#)
- SPOTLIGHT: Improving Inclusion Health Outcomes, Office for Health Improvement and Disparities: <https://analytics.phe.gov.uk/apps/spotlight/>
- Improving health literacy in the NHS, NHS Providers: [Improving health literacy in the NHS](#)
- Inclusion Health Groups, NHS England: [NHS England » Inclusion health groups](#)
- “Always at the bottom of the pile”: The Homeless and Inclusion Health Barometer 2024, Pathway, Crisis: <https://www.pathway.org.uk/app/uploads/2024/03/Always-at-the-Bottom-of-the-Pile-2.pdf>

- Wellbeing and mental health: Applying All Our Health, Office for Health Improvement & Disparities: <https://www.gov.uk/government/publications/wellbeing-in-mental-health-applying-all-our-health/wellbeing-in-mental-health-applying-all-our-health>
- Inclusion health: tackling the extreme end of health inequalities, NHS Confederation: <https://www.nhsconfed.org/articles/inclusion-health-tackling-extreme-end-health-inequalities>
- Beyond Pockets of Excellence: Integrated Care Systems for Inclusion Health, Pathway: <https://www.pathway.org.uk/resources/beyond-pockets-of-excellence-integrated-care-services-for-inclusion-health/>
- Inclusion Health Resource Pack, Norfolk & Waveney Integrated Care System: [Dignity-Framework-Guidance-Report.pdf](#)
- Domestic Abuse Resource Pack, GATE Herts: [Gate Herts - YouTube](#)
- The Faculty for Homeless and Inclusion Health, Pathway: <https://www.pathway.org.uk/the-faculty/>
- Integrated health and social care for people experiencing homelessness, National Institute for Health and Care Excellence: <https://www.nice.org.uk/guidance/ng214>
- Groundswell, Out of Homelessness: <https://groundswell.org.uk/>
- Homeless Link: <https://homeless.org.uk/>
- Safe Surgeries, Doctors of the World: <https://www.doctorsoftheworld.org.uk/safesurgeries/>