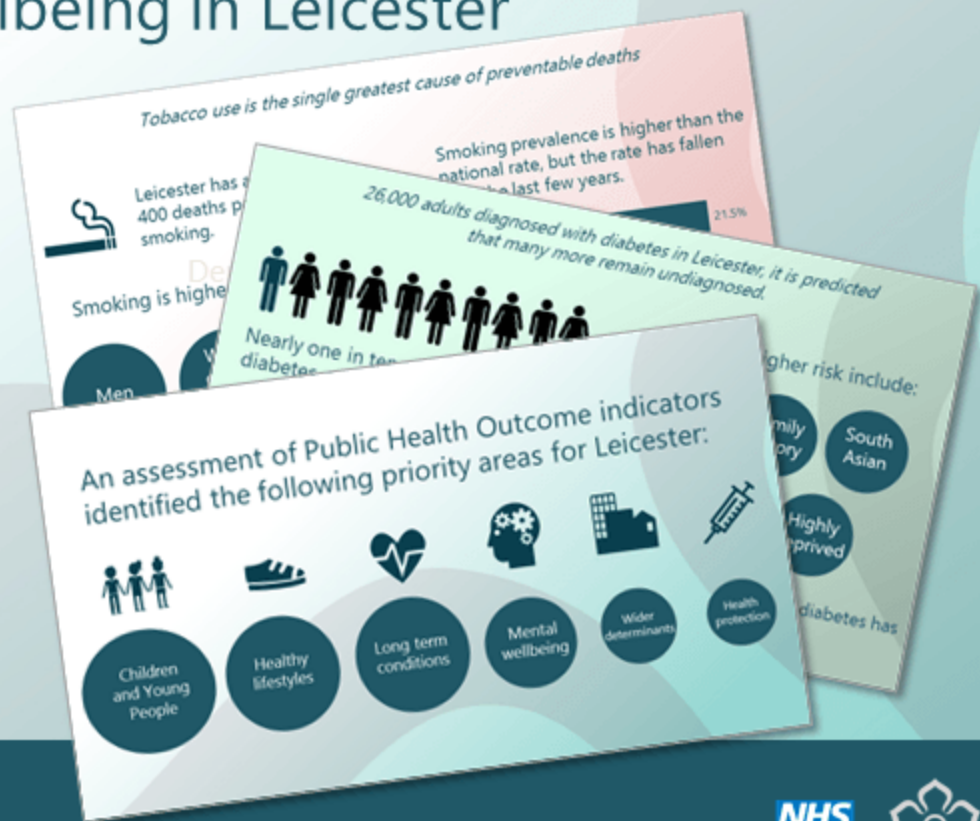


Snapshots: Health and Wellbeing in Leicester

Infographic slide set
to accompany the
JSNA online briefings.

www.leicester.gov.uk/JSNA



Leicester
population:
337,653

Age	2014	2038
< 19	27%	26%
20-64	61%	58%
65+	12%	16%



The population is forecast to rise at a faster rate than England, reaching 404,000 by 2038.

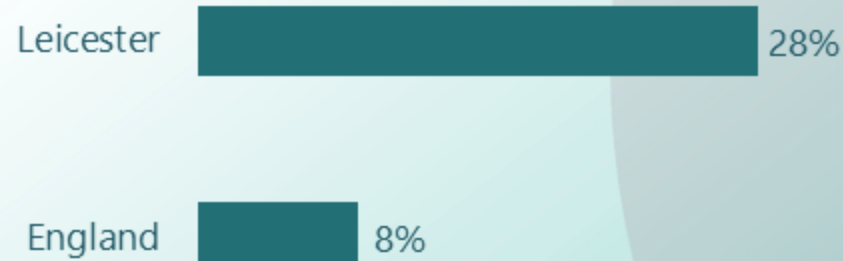
The proportion of people aged over 65 is forecast to increase.

Ethnicity of Leicester and England

- White British
- Asian Indian
- Other Asian
- Black British
- White Other
- Mixed Ethnicity
- Other Ethnicity



People whose main language is not English



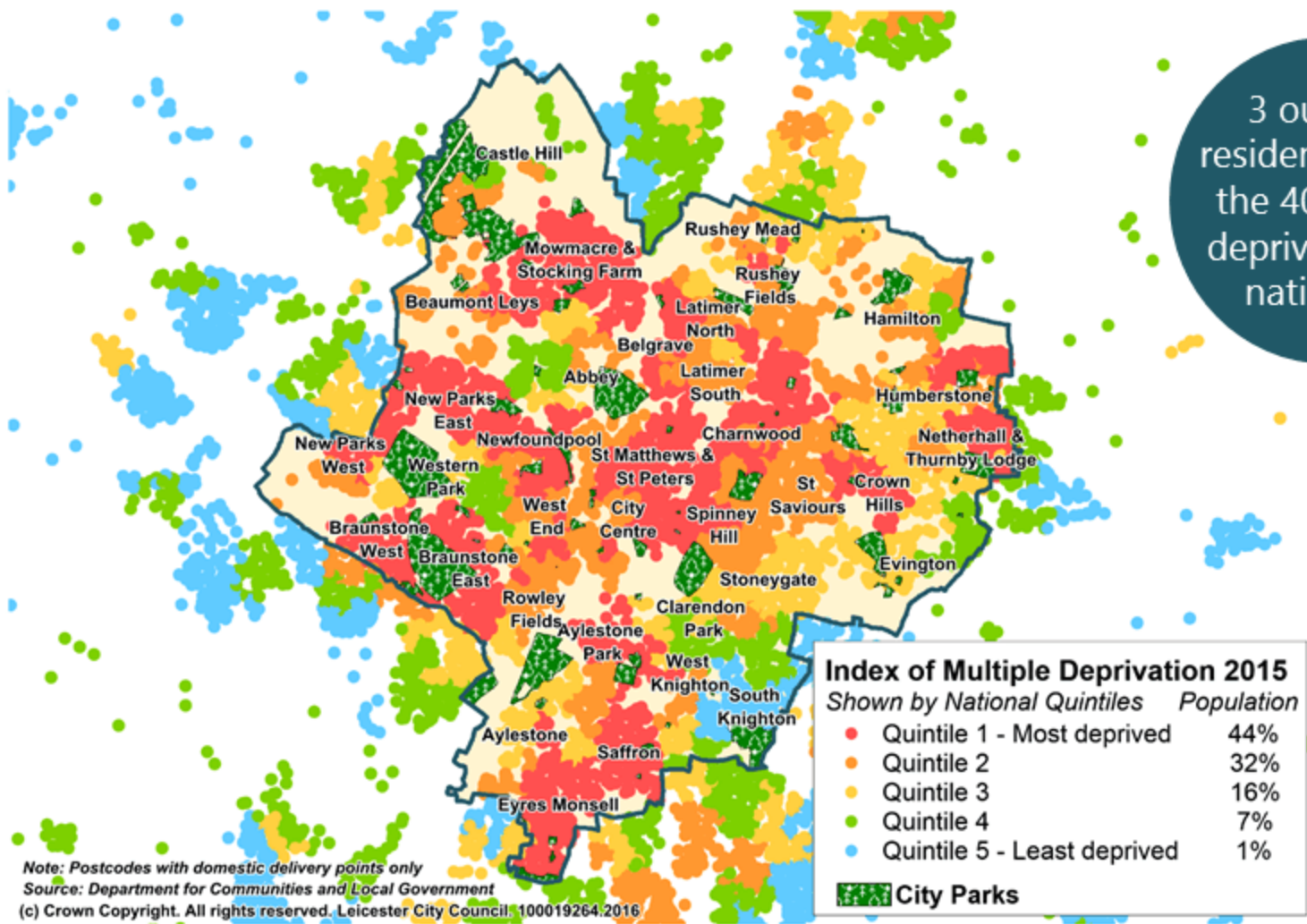
One in four households include someone with a disability or longterm illness

Leicester's LGBT community is estimated at 4%

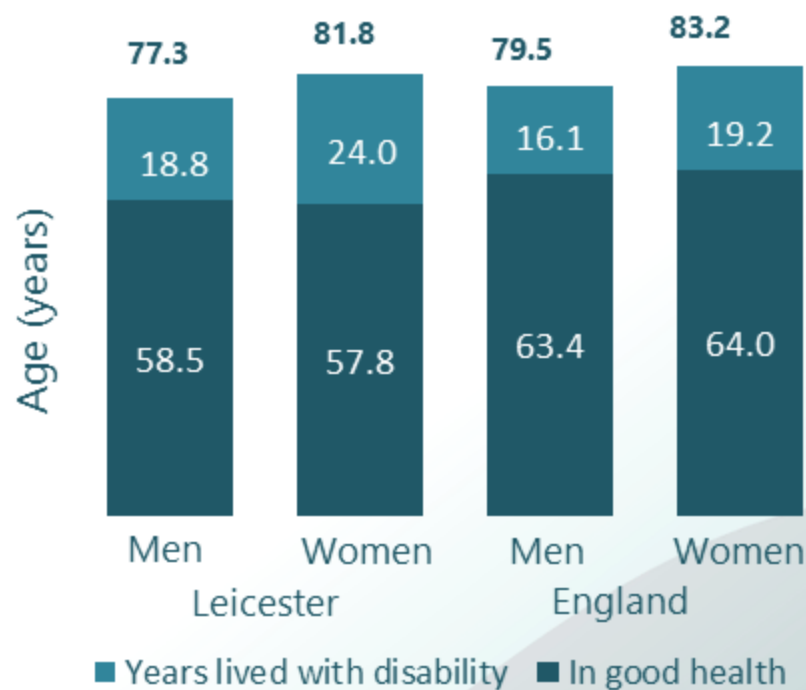
Religion



3 out of 4 residents live in the 40% most deprived areas nationally.



Note: Postcodes with domestic delivery points only
Source: Department for Communities and Local Government
(c) Crown Copyright. All rights reserved. Leicester City Council. 100019264.2016



Women have a longer 'years lived with disability' life expectancy, compared to men.

Life expectancy is improving, but not as fast as nationally.

% of all deaths...

Cancers (25%)

Cardiovascular diseases (28%)

Respiratory diseases (13%)

These account for 2 out of every 3 deaths

An assessment of Public Health Outcome indicators identified the following priority areas for Leicester:



Children
and Young
People



Healthy
lifestyles



Long term
conditions



Mental
wellbeing



Wider
determinants



Health
protection

Children and young people under 20 years old make up a quarter of Leicester's population



Over two thirds of Leicester's school children are from minority ethnic backgrounds.

What's going well?	What needs improving?
<ul style="list-style-type: none">Higher rates of childhood immunisationsHigher rates of breastfeedingLower hospital admissions for injury, mental health and self-harm	<ul style="list-style-type: none">Obesity amongst primary school childrenInfant mortality and low birthweightSchool readiness of children at end of reception

When compared with England

The Children and Young People's JSNA will be released later in 2016.

Tobacco use is the single greatest cause of preventable deaths



Leicester has an estimated 400 deaths per year from smoking.

Smoking prevalence is higher than the national rate, but the rate has fallen over the last few years.

Smoking is higher amongst:

Men

White ethnic groups

Routine & manual workers

Leicester



21.5%

England



19%

The Stop Smoking Service has a higher quit rate than nationally.

Obesity is a high risk factor for type 2 diabetes, stroke, heart disease and cancer



% Excess weight* in adults



% Eating 5 fruit & veg a day



% Exercise for 150 minutes + a week



Leicester has a better rate for excess weight but a worse rate for fruit and veg consumption.

The population achieving at least 150 minutes physical activity is worse but improving.

Obesity is higher among:

Women

Black
British

35-64
age
group

*Excess weight refers to those overweight or obese

Alcohol misuse is the third biggest lifestyle risk factor after smoking and obesity.

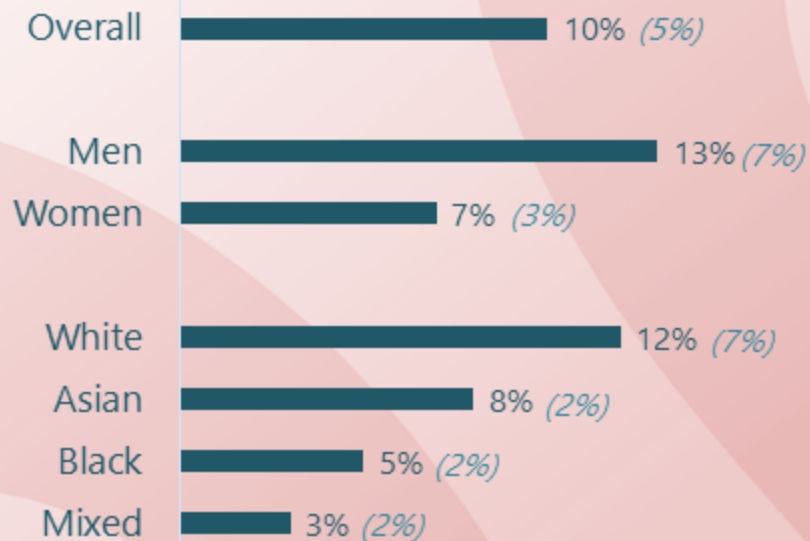
On average, half of Leicester's adult population drink less alcohol than nationally.

Harm is significantly higher than nationally, demonstrated by alcohol related hospital admissions, mortality and crime.

There has been a reduction in hospital admission rates related to alcohol since 2010/11.



% of Leicester adult drinking population drinking above the recommended units
(as a % of all Leicester adults):



Includes contraception, and testing and treatment of sexually transmitted infections.



The two most common sexually transmitted infections are chlamydia and genital warts.

Those at highest risk of poor sexual health include:

Men who have sex with men

Sex workers

Victims of domestic violence

Higher rate of newly diagnosed HIV cases than England (per 10,000 aged 15-59).



Over half of HIV diagnoses in Leicester are late, but this is improving.



Oral health is an integral part of overall health and wellbeing.

Adults in Leicester report significantly poorer oral health than England.

Oral health problems are largely preventable.

Risk factors for oral disease include:

- High frequency of sugar in diet
- Smoking or chewing tobacco
- Excessive consumption of alcohol
- Poor oral hygiene
- Irregular dental attendance



Oral health issues in the city include...

Higher incidence of oral cancer

Fewer adults going to dentist

Lower satisfaction with dental services

Affordability of NHS dental charges is an issue

Drug misuse is responsible for 1 in 7 deaths among people in 20s and 30s (2014)



Leicester has a higher rate than England of Opiate/Cocaine users and only half are in treatment.

Overall, drug use in the population is low and has reduced in the last 10 years.

Successful completion of treatment for both opiate and non opiate drug use is similar to national rates.

Groups more likely to misuse drugs:

Men

Younger people

Mixed ethnicity

Un-employed

Groups less likely to access treatment:

Cannabis users

Prescription drug users

Younger people

BME people

CVD include stroke and disorders of the heart, and accounts for a third of all deaths nationally.



Over one in four deaths (28%) are from CVD in Leicester.

About 10,000 people in Leicester have diagnosed coronary heart disease.

4,600 people are recorded as having had a stroke or transient ischaemic attacks (TIA).

CVD is a major contributor to the Leicester and England life expectancy gap.

Risk is higher for:

Men

Older people

BME

Family history

Highly deprived

Modifiable risk factors include:

Poor diet

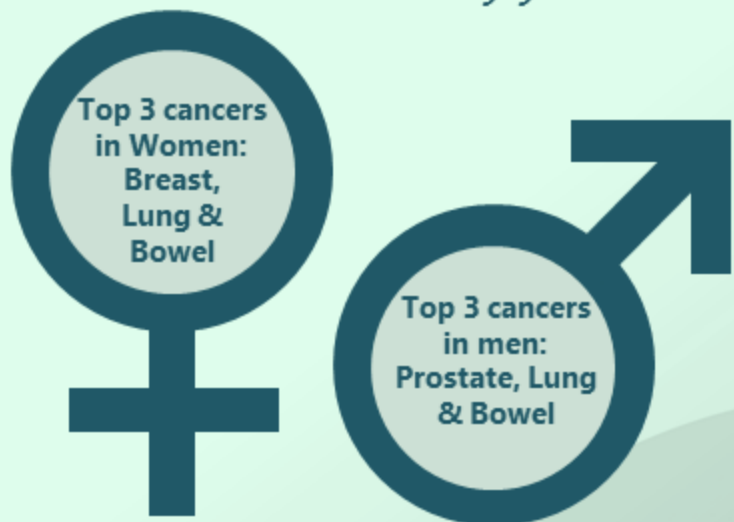
Physical inactivity

Excess weight

Smoking & alcohol

Stress

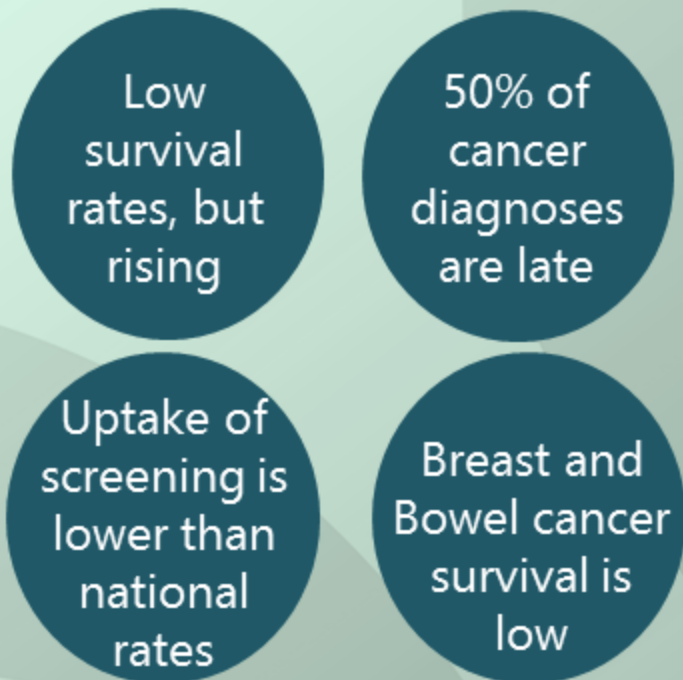
*Cancer is the second most common cause of death in Leicester.
Every year over 1,100 people are diagnosed.*



4,800 cancer patients on GP registers,
1.3% of the population.

Cancer accounts for 25% of all deaths in
Leicester and a third of deaths for the
under 75s.

Cancer issues in the city include:



There has been a reduction in cancer
mortality rates in under 75s.

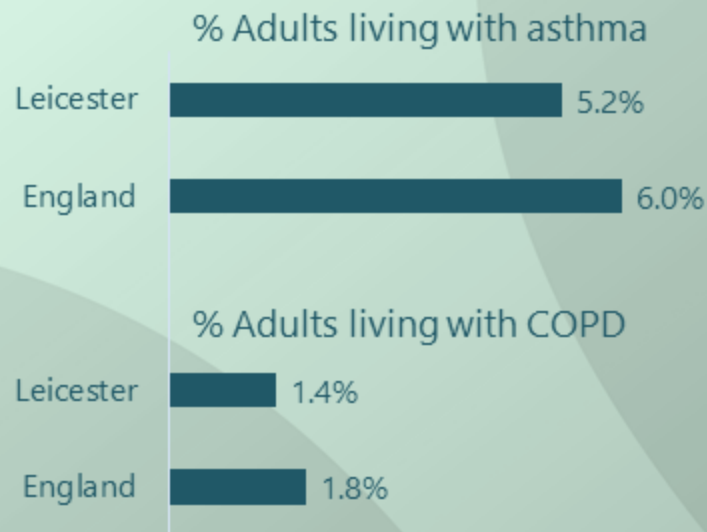
1 in 7 in the UK are affected by a respiratory disease, such as chronic obstructive pulmonary disease (COPD) or asthma.



About one in seven deaths (13.7%) are attributed to respiratory diseases.

Asthma affects all ages.

COPD more likely to affect men and the over 40s.



There has been a reduction in the under 75 mortality rate from respiratory disease.

26,000 adults diagnosed with diabetes in Leicester, it is predicted that many more remain undiagnosed.



Nearly one in ten adults (9%) have diabetes, compared to 6% nationally.

Diabetes in Leicester is predicted to increase to 12% by 2025.

For South Asians diabetes develops earlier and is around four times the rate of the white population.

Groups at higher risk include:

Excess weight

Family history

South Asian

Older people

Highly deprived

Prevalence of recorded diabetes has increased.

Dementia is caused by a number of diseases that affect the brain.



Dementia cases are set to rise in the future, a reflection of our ageing population.

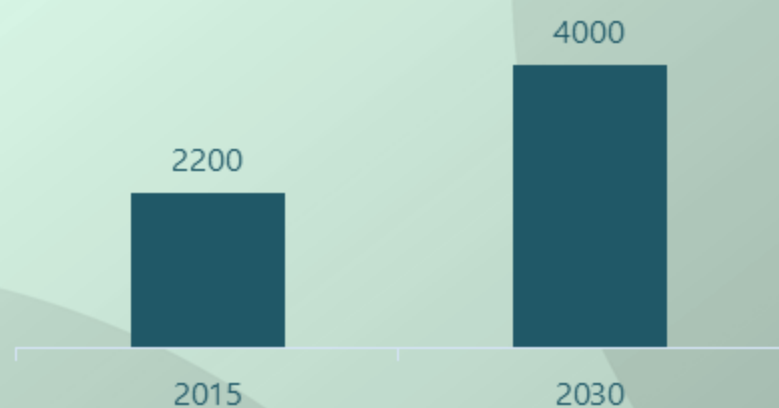
It is important to:

Diagnose
cases
early

Improve
support
for carers

Personalise
care plans

Diagnosed and expected dementia cases in Leicester



It is expected that there will be 800 new cases a year.

More people over 65 have dementia but younger people get dementia too.

Common mental health problems are set to increase by 10% over the next 10 years.

18-64
year olds



Over 65
year olds



One in four working age adults and one in ten older people have a common mental health problem.

About 1 in 100 have a serious mental health illness.

Mental health issues in the city include:

Under
diagnosis of
depression

Higher rates
of hospital
admission for
mental illness



Worse than
average
outcomes

End of life care helps all those with advanced, progressive or incurable illness to live as well as possible until they die.



About three quarters of deaths in Leicester (1,725 - 2,050 people) will require palliative care.

An additional 400 deaths forecast each year, of which 250 may use palliative care services.

Caring for someone can be:

Physically demanding

Mentally challenging

Highly stressful

Patients on the palliative care register with a care plan



Patients with a care plan who died in their preferred place.



National estimates are that 20 in every 1,000 people have a mild to moderate learning disability with an additional 3-4 people in every 1,000 having severe learning disabilities.



In Leicester, nearly 2,000 people are registered with learning disabilities (LD) through their GP.

However, in 2015 it was estimated that the real figure is over 6,000.

Life expectancy is lower for people with learning disabilities, but increasing.

Prevalence is higher amongst:

15-19
year olds

40 – 59
year olds

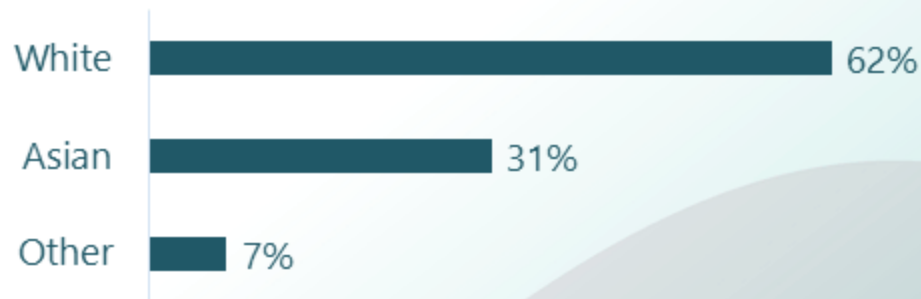
White
ethnic
groups

Support
available for
people with LD
to live in their
own home

A dark teal silhouette of a house with a chimney on the right side. The text is centered within the house shape.

Over 5,000 adults receive long term support provided by Leicester City Council

Services are personalised to support independence, and ability to live in own home where possible.



Primary support reasons include:

18-64	65+
<ul style="list-style-type: none">• Learning disabilities• Physical support• Mental health	<ul style="list-style-type: none">• Physical support• Mental health• Memory/Cognition

Future challenges

A reducing budget

Care Act requires support for carers



Higher demand for social care support

Increasing and ageing population

New arrivals are a substantial mix of populations with differing health and social care needs.



Currently there are about 1,000 asylum seekers in Leicester, and this number is increasing.

The stressful circumstances by which asylum seekers arrive in the UK means that the prevalence of mental ill health is high.

% Born outside of the UK and arrived after 2000

Leicester

16.2%

England

6.9%

Being younger, healthier, with fewer children, economic migrants tend to be infrequent users of healthcare.

However, the use of emergency care is higher among this group.

Sources

Leicester population	ONS mid-year estimates, 2014, ONS population forecasts (2014 based), Census 2011, Leicester Health and Wellbeing Survey 2015
Leicester deprivation	Department for Communities and Local Government, IMD 2015.
Life expectancy and mortality	Office for National Statistics mortality data 2012-14, Life expectancy and Healthy Life expectancy at birth 2012-2014
Children and Young People	Children's JSNA briefings 2016 (forthcoming)
Tobacco	Local Tobacco Control Profiles, Public Health England (PHE), 2015, Health and Social Care Information Centre: Statistics on Smoking, 2015
Obesity	Active People Survey, Sport England, 2015.
Alcohol	Health and Wellbeing Survey 2015, Local Alcohol Profiles for England: Public Health England 2015
Sexual Health	JSNA online briefing: Sexual health, Sexual and Reproductive Health Profiles: Public Health England, 2015
Oral Health	Leicester Dental Survey 2015
Drugs	Crime Survey for England and Wales 2013/14, Public Health Outcomes Framework Indicators 2015
Diabetes	NHS Quality Outcomes Framework data March 2015, Diabetes prevalence model; Yorkshire and Humber Public Health Observatory
Coronary Heart Disease	NHS Quality Outcomes Framework data March 2015, Public Health Outcomes Framework Indicators 2015
Cardiovascular disease	NHS Quality Outcomes Framework data March 2015, Public Health Outcomes Framework Indicators 2015
Cancer	NHS Quality Outcomes Framework data March 2015, Health and Social Care Information Centre, Office for National Statistics mortality data
Respiratory disease	NHS Quality Outcomes Framework data March 2015, Public Health Outcomes Framework Indicators 2015
Dementia	NHS Quality Outcomes Framework data March 2015, Dementia UK, The full report 2007
Mental health	Projecting Older People Population Information, Projecting Adult Needs and Service Information, http://www.leicester.gov.uk/media/178811/mental-health-jspna.pdf
End of life care	PHE: End of Life Care Profiles, Where people die (1974–2030): past trends, future projections and implications for care B. Gomes and I. Higginson, Palliat Med 2008; 22: 33
Learning disabilities	NHS Quality Outcomes Framework data March 2015, Age-specific standardised mortality rates in people with Learning Disability, Journal of Intellectual Disability Research
Adult Social Care	Leicester City Council, Service data.
New arrivals	ONS Census 2011, Future Vision Coalition, 2009
Infographics	Gurjeet Rajania, Public Health Analyst, Leicester City Council & Noun Project