

6 Health

Health in brief:

75% of Borough residents describe their health as “good” - higher than County, regional and national averages

26% of households in the Borough have one or more person with a limiting long term illness - lower than County, regional and national averages

8.3% of the Borough’s population regularly provide unpaid care to other people, 16% of whom provide care for 50 hours or more a week

Borough fertility rate is among the highest in Hampshire and has been increasing since 2001

Levels of low birth weight in the Borough below the national average

Teenage pregnancy rates in the Borough below the national average but higher than County average

Male life expectancy 77.4 years; female life expectancy 81.8 years

Directly standardised mortality rates for cancer and circulatory disease show a general downward trend over the last 10 years

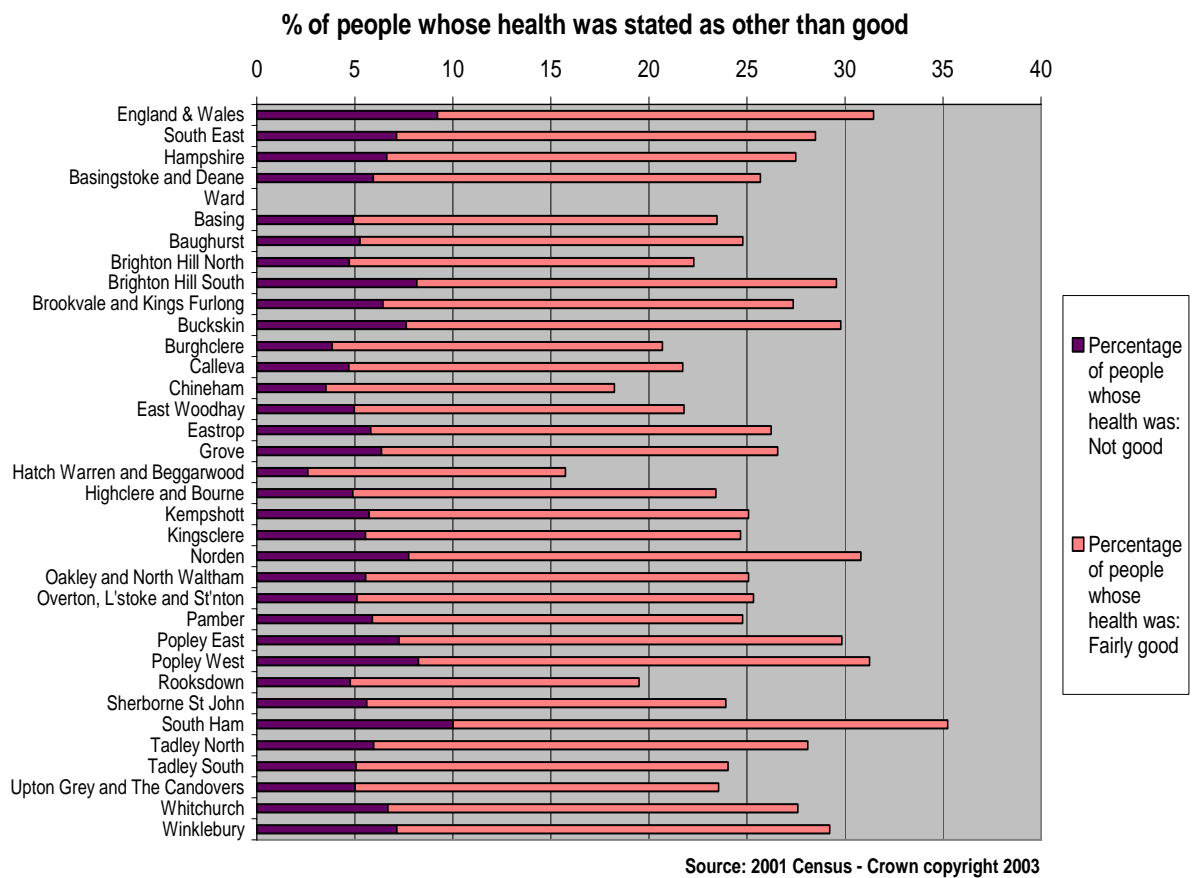
- 6.1 This section combines Census data from the [Office for National Statistics](#) with information from the Hampshire Public Health Annual Report 2006/2007, and the 2007 Health Profile for Basingstoke and Deane, to describe the health of the Borough’s population.
- 6.2 At the very local level, data from the 2001 Census still provides the latest broad information on the general health of the population in any part of Basingstoke and Deane, together with the incidence of limiting long-term illness and the extent of unpaid care. This profile presents this data at both Borough and ward level.
- 6.3 More recent information, providing a comprehensive set of public health indicators for the Borough and other local authorities in Hampshire, can be found in the Hampshire Public Health Annual Report 2006/2007, which can be accessed at http://www.hampshirepct.nhs.uk/phar07_201207.pdf . The Hampshire Primary Care Trust, which is responsible for preparing the Hampshire Public Health Annual Report, was formed in October 2006, following the merger of the 7 Primary Care Trusts which previously served the County.

- 6.4 A third source of health information covering Basingstoke and Deane takes the form of a Community Health Profile, designed to support action by local government and primary care trusts to tackle health inequalities and improve people's health. The Association of Public Health Observatories was commissioned by the Department of Health in 2005 to produce Health Profiles at community level for all 388 local authorities in England.
- 6.5 The first batch of profiles was produced in 2006, and updated and improved Community Health Profiles 2007 were released in June 2007, using key health indicators which enable comparison locally, regionally and nationally, as well as over time. Health Profiles for each local council in England can be accessed at: <http://www.communityhealthprofiles.info/index.php> .
- 6.6 The 2007 Community Health Profile for Basingstoke and Deane, which can be found at: http://www.communityhealthprofiles.info/profiles/hp2007/lo_res/24UB-HP2007.pdf , provides a recent snapshot of the health of residents of the Borough.
- 6.7 In addition, data relating to the percentage of the adult population involved in active participation in sport and recreation can be accessed via the Sport England South East Region website at: http://www.sportengland.org/southeast_index/southeast_get_resources/active_people_results.htm .
- 6.8 Other sources of health data can be accessed via the [Data for Neighbourhood Renewal](#) website, while the [Compendium of Clinical and Health Indicators](#) , which is held on the website of the National Centre for Health Outcomes Development, provides data on specific health issues down to local authority level where available.

General Health

- 6.9 At the 2001 Census, a higher proportion of Basingstoke & Deane residents (75%) described their health as "good" compared to County, regional and national averages. Figure 6.1 shows the percentage of people who described their health as "Not good" or "Fairly good". Nearly 6% of people in the Borough described their health as "not good", a lower proportion than in the County, Region or England and Wales.

Figure 6.1: General health



6.10 At ward level, the percentage of local residents who described their health as “Not good” or “Fairly good” ranged from less than 16% in Hatch Warren & Beggarwood (2.6% “Not good”) to more than 35% in South Ham (10% “Not good”).

Limiting Long Term Illness

6.11 Figure 6.2 shows the percentage of households containing one or more person with a limiting long-term illness at the time of the 2001 Census. The Borough rate of 26% is noticeably lower than the County, regional or national averages. At ward level the range extends from less than 10% in Rooksdown to more than 36% in South Ham.

Figure 6.2: Limiting long-term illness

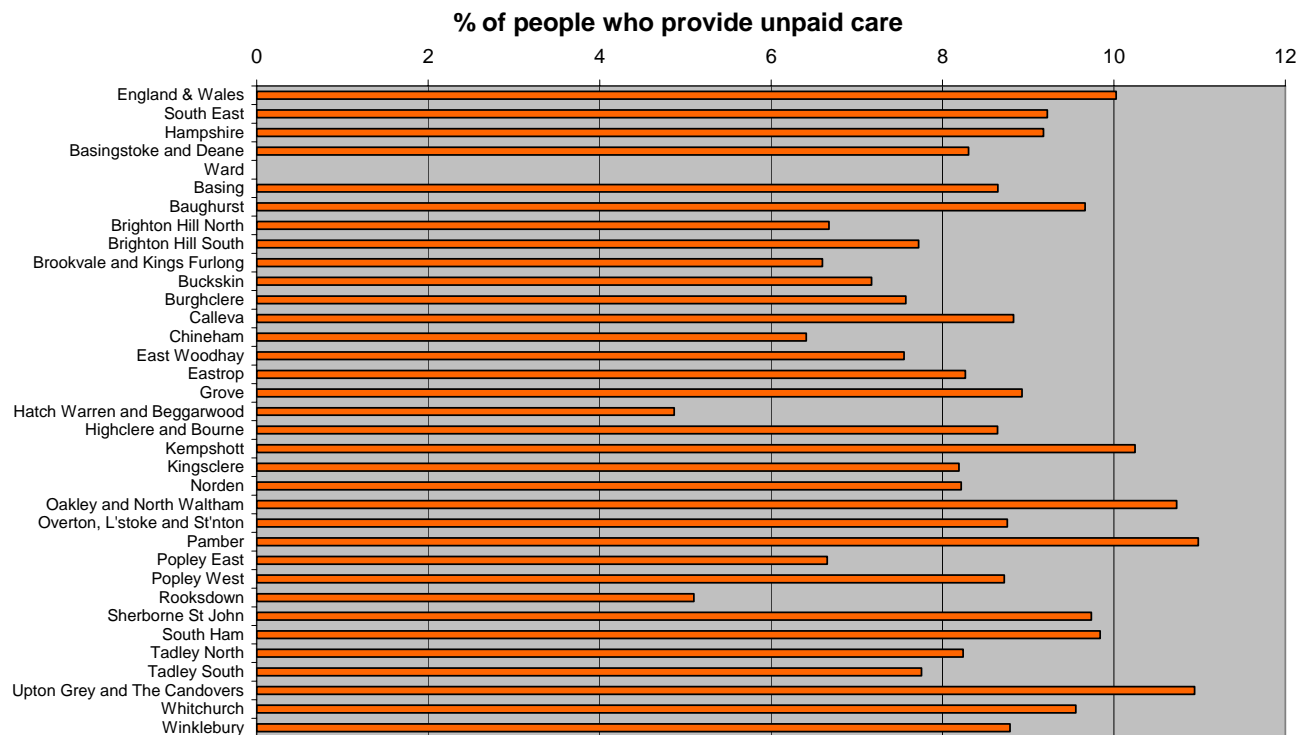


Source: 2001 Census - Crown copyright 2003

Provision of Unpaid Care

6.12 The extent of unpaid care provision is an indication of the welfare and well-being of the Borough population. It is often directly related to health, both in terms of those people who need care, and in terms of those people on whom responsibility is placed to provide it, many of them providing care on a full time basis. Figure 6.3 provides an insight into levels of unpaid care within the Borough, indicating that, at the 2001 Census, the local level of 8.3% of the population providing unpaid care was below the County and regional averages (9.2%), and the national average (10%).

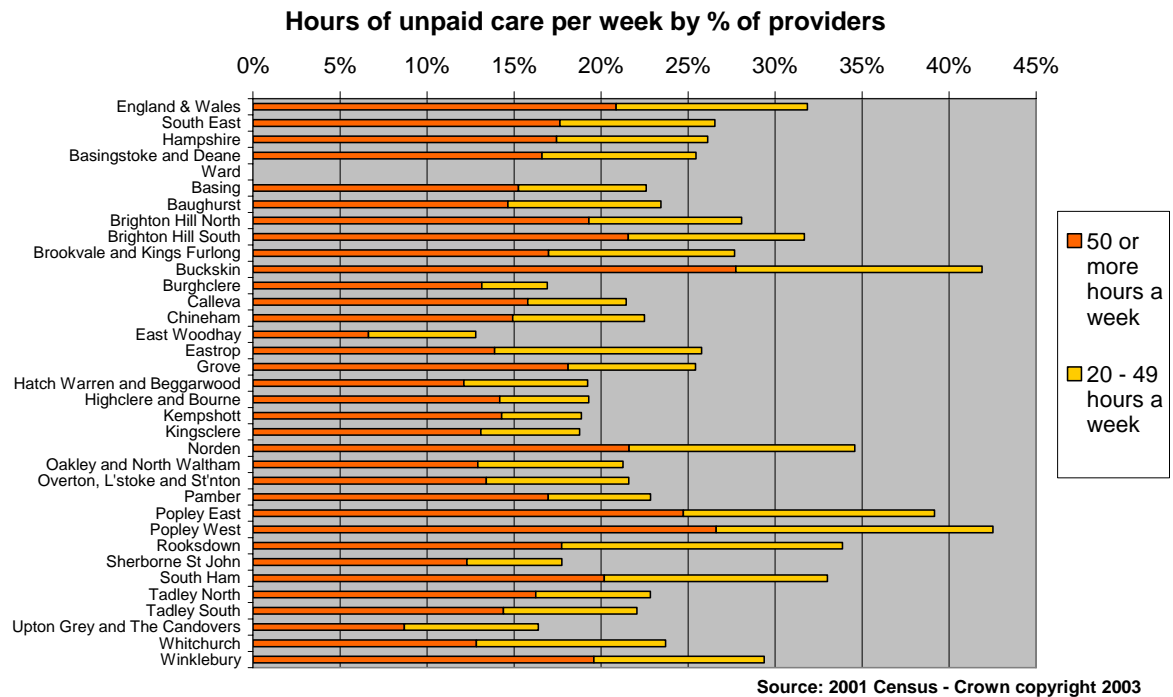
Figure 6.3: Provision of unpaid care



Source: 2001 Census - Crown copyright 2003

- 6.13 At ward level, the highest percentages of people providing unpaid care irrespective of the number of hours provided (around 11%) were found in the rural wards of Pamber, Upton Grey & The Candovers and Oakley & North Waltham.
- 6.14 Over 16% of all those who provide unpaid care in the Borough do so for more than 50 hours per week, just 1% lower than the County and regional averages, but 4% lower than the national average.
- 6.15 At ward level, the highest percentages of people providing care for more than 50 hours per week were found in the more deprived urban wards of Buckskin, Popley West and Popley East. This is illustrated in Figure 6.4, which shows that more than 27% of people who provide care in Buckskin, do so for at least 50 hours a week – well above the national average – followed by 26%+ in Popley West and 24%+ in Popley East. In total, more than 40% of carers in both Buckskin and Popley West provide at least 20 hours care per week.

Figure 6.4: Hours of unpaid care provided



Public Health Indicators

- 6.16 The Hampshire Public Health Annual Report 2006/2007, which can be accessed at http://www.hampshirepct.nhs.uk/phar07_201207.pdf, provides a comprehensive set of public health indicators for the Borough and other local authorities in Hampshire. As well as covering local demography, the report includes sections on 'Health and Well-being in Hampshire', 'Communicable Disease Control', 'Health Inequalities and determinants of Health in Hampshire', 'Lifestyles' and 'Climate Change'.
- 6.17 The report shows considerable variation in health outcomes between different geographical areas and different population groups within Hampshire, but overall the indicators are favourable compared to the South East region and to England and Wales as a whole.

Demography

- 6.18 As well as acknowledging continuing growth in the number of people aged over 65, the section of the Public Health Annual Report covering demography addresses recent increases in fertility rates.
- 6.19 Data from the report shows that Basingstoke and Deane had 58.5 live births per 1,000 women aged 15-44 at 2005. This is among the highest rates within

the Hampshire districts (average 55.5/1,000) and is comparable with the national average fertility rate of 58.4/1,000.

- 6.20 The 2005 data represent a continued gradual increase seen year on year since 2001 when the fertility rate per 1,000 women aged 15-44 was 54.5, mirroring a similar increase at national (England and Wales) level.

Health and Well-being

- 6.21 The section of the Hampshire Public Health Annual Report entitled 'Health and Well-being in Hampshire' covers major causes of death, chronic diseases and health problems affecting older people. It is acknowledged that as older people live longer, their health and social care needs tend to escalate.
- 6.22 The Public Health Annual Report indicates that cancer and cardiovascular disease (coronary heart disease and stroke) are responsible for 55% of all deaths in Hampshire. Data covering the major causes of death can also be found in the 2007 Basingstoke and Deane Community Health Profile at http://www.communityhealthprofiles.info/profiles/hp2007/lo_res/24UB-HP2007.pdf and in the [Compendium of Clinical and Health Indicators](#) .
- 6.23 The Public Health Annual Report provides data on issues such as prevalence of coronary heart disease and stroke, levels of hospital admissions and death rates within Basingstoke and Deane and other parts of Hampshire. It also includes data on the incidence of each of the major forms of cancer within each Hampshire district, together with death rates, five-year survival rates, and take-up rates for cancer screening programmes.
- 6.24 The Community Health Profile shows how death rates from both cardiovascular disease and cancer among the under-75's in the Borough have declined over the period 1996-2004, broadly in line with, and generally below, the national averages.
- 6.25 The Compendium of Clinical and Health Indicators provides data covering mortality from various causes based on the Directly Standardised Mortality Rate. This uses the European Standard Population, enabling comparison of mortality rates in different areas by adjusting for differences in population age and sex structure.
- 6.26 The Public Health Annual Report also provides data on other diseases of long duration and generally slow progression, such as diabetes and chronic respiratory diseases, and looks at some of the health problems affecting the growing number of older people in Hampshire.

Communicable Disease Control

- 6.27 The section of the Hampshire Public Health Annual Report entitled 'Communicable Disease Control' covers immunisation and notification of infectious diseases. Childhood immunisation data published in the report shows that over the period 2006-2007, the percentage of children immunised at various ages tends to be slightly higher than the average for England as a whole.

Health Inequalities and determinants of Health

- 6.28 The Hampshire Public Health Annual Report acknowledges that health inequalities within the County are generally linked with areas of relative deprivation. A number of the issues addressed under 'Health Inequalities and determinants of Health in Hampshire' are also covered in the Community Health Profile, as well as being set out below.

Low Birth Weight

- 6.29 Data on babies weighing less than 2500 grams is provided in 'Vital Statistics', published by the Office for National Statistics (ONS). The Hampshire Public Health Annual Report 2006/2007 shows that the Borough rate for 'low birth weight' babies over the period 2003-5 of 7.16 per 100 births exceeds the Hampshire average of 6.6/100, but matches the national average of 7.1/100. Low birth weight babies are associated with many factors including smoking during pregnancy, maternal illness, congenital abnormalities and socio-economic deprivation.

Life Expectancy at Birth

- 6.30 ONS data for the period 2003-2005, published in the Hampshire Public Health Annual Report 2006/2007, shows that the average male in the Borough can expect to live 78.4 years, and the average female 82.1 years. Life expectancy rates within the Borough continue to rise in line with the Hampshire averages of 78.9 for males and 82.4 for females, and local residents can expect to live at least a year longer, on average, than people in England and Wales as a whole (male: 76.9 and female: 81.1).
- 6.31 The 2007 Community Health Profile for Basingstoke and Deane shows how local life expectancy rates have continued to improve over the period 1996-2004, remaining above the national averages for both males and females. It also indicates that whilst women continue to have higher life expectancies than men, the gap between the life expectancy for men and women has reduced.
- 6.32 Life expectancy rates for other parts of Hampshire, and changes over the recent past, can be found in the Public Health Annual Report, which explains

that focus is now turning to the notion of disability-free or healthy life expectancy, rather than overall life expectancy.

Lifestyles

- 6.33 The 'Lifestyles' section of the Public Health Annual Report addresses the issues of smoking, obesity, physical activity, sexual health, alcohol and drugs. Difficulties associated with collecting robust data at local level on the majority of these themes means that surveyed data, as opposed to modelled or estimated data, is available at Borough level only for measures of physical activity and sexual health.

Physical Activity

- 6.34 The Hampshire Public Health Annual Report 2006/2007 emphasizes the importance of an active lifestyle in improving and maintaining health. Stressing that increasing activity levels will contribute to the prevention and management of various conditions and diseases, it focuses on Sport England's Active People Survey 2005/06, which measured levels of participation in sport and active recreation within all local authorities in England.
- 6.35 Based on recommended levels of physical activity, the Active People Survey indicated that 13.2% of adults participated in at least 30 minutes of moderate intensity physical activity on an average of 5 times a week in Basingstoke and Deane, just above the Hampshire average of 13.1% and considerably higher than the England average of 11.6%.
- 6.36 The National Framework for Sport target to increase participation in sport by 1% per year is based on the number of adults participating in at least 30 minutes of moderate intensity physical activity on an average of 3 times a week. In Basingstoke and Deane, 26.0% of adults participated at least 3 times a week, compared with 24.0% in Hampshire and 22.6% in the South East Region as a whole.

Sexual Health - Teenage Conception Rates

- 6.37 The only Borough level measure of sexual health in the Hampshire Public Health Annual Report is the teenage conception rate. Provisional figures from the Teenage Pregnancy Unit and the Office for National Statistics, published in the Hampshire Public Health Annual Report 2006/2007, show that the Basingstoke and Deane rate for the number of conceptions to girls under 18 for the period 2003-2005 was 34.0 per 1,000 girls aged 15-17. This is very similar to the previous Borough rate of 33.9/1,000 for the period 2002-2004, and is higher than the County average of 30.6/1,000, but well below the national average for England of 41.6/1,000.

Climate Change

- 6.38 Acknowledging that climate change will, if not addressed, impact negatively on health, widening health inequalities, the Hampshire Public Health Annual Report identifies the main impacts on health within Hampshire. At Borough level, the only dataset included in this section is that of air quality, measured in terms of CO2 emissions per capita, which is covered in 'The Local Environment' section of this profile.

Health Summary for Basingstoke and Deane

- 6.39 The 2007 Community Health Profile for Basingstoke and Deane includes a chart showing how the Borough compares on 26 indicators (20 of which are directly health related) to the average, best and worst cases in local authorities in England, as well as the regional average. On 11 of the indicators which are directly health related, Basingstoke and Deane performs significantly better than the England average, and on only one, that of the level of road injuries and deaths per 100,000 population over the period 2003-2005, is the Borough rate described as significantly worse than the England average.