



# Living Well: Health and wellbeing for a better quality of life

A briefing paper to inform the University of Winchester and Southern Policy Centre Seminar: 14 March 2019

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## Introduction

In March 2018 the University of Winchester and Southern Policy Centre hosted a seminar on health and social care, exploring the challenges facing the Central South as we strive to meet the pressures demographic changes put on our health and social services.

The growing number of older people is in no small measure due to the medical and social progress we have made in recent years. Yet, whilst many can look forward to longer lives, they may also face more complex medical conditions and physical challenges as they age. One of our speakers last March, Lord Geoffrey Filkin from the Centre for Ageing Better, put is very simply: longer lives are a great opportunity, but what will make those extra years good? That is the question our seminar addresses.

Lord Filkin highlighted five factors which make for a better life as we age: good



enough health, good enough finances, sustaining identity and independence, living in a suitable home, and feeling socially connected and valued. So healthy lifestyles - keeping mentally and physically active, eating well and maintaining a sense of meaning in our lives - matter.

All that is, of course, easy to say, and we all aspire to live well. But in a world which puts so many demands on our

time, and when we are beset by a huge amount of often conflicting advice, that can be hard to achieve.

So 2019's joint seminar is designed to explore what 'living well' might mean. We will hear from experts in diet, physical activity and mental well-being. There will be an opportunity to discuss how we can bring these different strands together to improve the quality of our lives for now and for the future.

The University and SPC aim to encourage a discussion about what living well means for all members of our community. This briefing paper provides some background information to stimulate thinking in advance of the seminar. It is not intended to be a full statistical analysis of health and other data for the area, rather it uses key statistics to highlight some of the challenges we face.

## Our community

This briefing looks at the Central South of England, that is local authority areas within the former County of Berkshire, the Counties of Dorset, Hampshire, Surrey and West Sussex, and the unitary authorities of Bournemouth, Isle of Wight, Poole, Portsmouth and Southampton. Unless it says otherwise, the data below refer to this area. Whilst communities across the area share many characteristics, there are also differences, notably between urban areas and the rural parts of many counties. Where appropriate, the briefing highlights those differences.

## Our population

There are 6.2m people living in the Central South, around 18% of them in the larger urban settlements (Bournemouth, Poole, Portsmouth, Reading, Slough and Southampton). About 1.2m of those residents are aged over 65. By 2039 the area's population will have grown to just over 7m, a little more than a quarter of whom will be over 65 – around 1.9m people. So the Central South is home to a growing population of older people.

The biggest challenge for these individuals, and for society as a whole, will be ensuring they enjoy a healthy old age. At present, whilst life expectancy in the Central South is good, there will nevertheless be a period in the average life when an older person requires more health care and support. Statisticians distinguish between 'life expectancy' and 'healthy life expectancy' - the number of years individuals can expect to live free from disabilities or debilitating conditions. Table 1 shows the gap between life expectancy and healthy life expectancy for men and women in the Central South.

Men	Life Expectancy	80.2 yrs
	Healthy Life Expectancy	65.4 yrs
	Gap	14.8 yrs
Women	Life Expectancy	83.9 yrs
	Healthy Life Expectancy	66.5 yrs
	Gap	17.4 yrs

Table 1: Gap between Life Expectancy and Healthy Life Expectancy (years) for men and women in the Central South (Source: Public Health England, 2014-16 data<sup>iii</sup>)

Healthy life expectancy varies across the Central South, with it being lowest for men and women in Slough (at 59.4 and 59.2 years respectively) and highest for both sexes in Wokingham (at 69.8 and 71.6 years respectively).

The question for the NHS, local councils and the wide range of voluntary and charitable organisations dedicated to improving peoples' health is how can we close that gap?

# Living Well

As Lord Filkin argued at our seminar on the ageing society, what we do before we get old greatly influences whether we can enjoy an active, healthy lifestyle after we turn 65. That view is backed up by the recently published NHS Long Term Plan. Published in January 2019, the Plan talks about the importance of "prevention of avoidable illness and its exacerbations...for example, smoking cessation, diabetes prevention through obesity reduction, and reduced respiratory hospitalisations from lower air pollution" (p.33).

Our seminar last spring also highlighted many other factors which have a direct effect on how well we can live in later life. Those included diet and exercise, but the discussion went beyond these widely acknowledged determinants of wellbeing to include the quality of housing, financial security, our social connections and other factors.

With that in mind, it's useful to examine how well we are living our lives, and so whether we are in good shape to benefit from a long and healthy old age. Do the data suggest we are living well?

### How healthy are we?

The Hampshire Health and Wellbeing Board undertakes a regular assessment of Hampshire's health. They estimate that around 6.7% of the County's adult population have a limiting long term health condition or disability. They go on to estimate that around 14% of adults smoke, 66% are overweight and 26% drink more alcohol than the recommended levels each week.

In other parts of the Central South the prevalence of smoking is generally comparable with the England average of 14.9%, although notably lower in rural areas such as Hart, East Hampshire and Christchurch. Similarly, the area's population is close to the England average of 61.3% for the proportion of the adult population who are overweight, with areas such as North Dorset (70%), Gosport (72.9%), Winchester (53.2%) and Bournemouth (55.9%) being outliers. But even at the average, that's a lot of people who may be storing up problems for later life.

#### How active are we?

Data from Energise Me, the Trust which aims to promote physical activity across Hampshire and the Isle of Wight, records that around 66% of Hampshire adult citizens are physically active – they enjoy 150+ minutes of activity each week. However, the same data show that around 22% of the population spend less than 30 minutes per week being physically active.

Across the Central South around 66% of the adult population are active for 150+ minutes, similar to the England average. Again there are variations, with only 55% of Slough's population being active, whilst 77% of adults in Mole Valley are active.

### How good is our mental health?

Data from Public Health England in table 2 gives an indication of the prevalence of mental health conditions across the Central South.

	Prevalence of common mental health disorders (% of population aged 16-74 years) – 2014/15	Long term mental health disorders (% of GP patients surveyed aged 18+) – 2017/18
South East (Hants, IoW and Thames Valley)	13.3	9.1
NHS Southampton CCG	17.1	11.7
NHS Portsmouth CCG	16.7	9.8
NHS Dorset CCG	15.6	9.2
NHS Wiltshire CCG	13.1	7.9
England average	15.6	9.1

Table 2: Mental health conditions across the Central South<sup>viii</sup> (nb Southampton and Portsmouth data are a sub-set of data for the South East, no data are included for Surrey)

Whilst the data for the area as a whole are broadly in line with England averages, they do nevertheless show a worryingly high proportion of people experience some form of mental health problem as adults. Moreover, it appears that such problems may be more common in our cities.

National data on England's mental wellbeing suggest that more people are experiencing mental health problems today than in the past. The Adult Psychiatric Morbidity Survey for England<sup>ix</sup> shows that in 2014 17% of adults aged 16-64 had a Common Mental Disorder (CMD). In the same year 9.3% suffered from a severe CMD, an increase from the 6.9% reporting such a condition in 1993.

#### How well do we eat?

Hampshire's Joint Strategic Needs Assessment (JSNA - see reference v) notes that a healthy diet is important for maintaining a healthy weight and reducing the risk of obesity, heart disease, bone and joint disorders and some cancers. Data drawn from the National Diet and Nutrition Survey<sup>x</sup> suggest that our diet is not as good as it should be, for example across the UK:

- people consume less than two thirds of the recommended amount of fibre per day
- adults have twice as much sugar as is recommended and children have over three times the recommended amount
- whilst women aged 19 and above eat the recommended maximum amount of red and processed meat, men aged 19 and above exceeded the recommended amount

Locally we do a little better - 58% of adults in Hampshire eat the recommended minimum of five portions of a variety of fruit and vegetables a

day, compared to 52.3% of the England population, although consumption is less in the most deprived communities. Public Health England data on diet for the local authorities in the Central South show that most parts of the area are similar to or better than the national average for fruit and vegetable consumption.<sup>xi</sup> However, once again it is notable the record is less good in urban areas.

## Is our environment healthy?

Our natural environment is one of the Central South's assets. We are home to two national parks and six Areas of Outstanding Natural Beauty – 38% of the land in Hampshire lies within a National Park or AONB and the Dorset AONB covers 42% of the county. These protected landscapes offer many the opportunity to spend time in the countryside, improving both their physical and mental health.

Air quality is an important contributor to quality of life, particularly in urban areas. High levels of particulate pollution and nitrogen dioxide can exacerbate respiratory and cardio-vascular conditions and even cause illness and premature death. Southampton, for example, estimate that the levels of particulates they experience could contribute to 110 premature deaths each year.<sup>xii</sup> Winchester, Eastleigh and other built up areas also suffer from poor air quality.

Table 3 shows Public Health England's data on one measure of air pollution across the Central South and its estimated impact on mortality.

	Air pollution: fine particulate matter (µg/m³) (2017)	% mortality attributed to particulate air pollution (2017)
Central South: overall	9.6	5.5
Central South: larger urban settlements	10.2	5.8
Central South: other areas	9.1	5.3
England average	9.3	5.1

Table 3: Particulate air pollution and mortality attributable to that pollutionxiii

Particulate pollution across the Central South is slightly above the England average, notably so in larger urban areas. That is likely to be linked to higher than average mortality, as well as several debilitating conditions people may have to live with in later life.

#### What else contributes to us living well?

Whilst physical and mental health is important in shaping our wellbeing, other factors are of equal importance, sometimes because they can also have direct impacts on health:

 Housing – Government guidance to local public health and planning practitioners<sup>xiv</sup> spells out how having a decent home is central to improving health and wellbeing and reducing health inequalities. The Government's Stock Condition Survey\* records that across England around 20% of houses are in poor condition – 27% in the private rented sector, 24% owner-occupied and 22% social rented.

Council and other stock surveys suggest that in general our housing is in better condition than the national picture. The challenge the Central South's residents face is accessing housing. That is in part a consequence of high purchase and rental costs, combined with a build rate that falls below target in many areas.\*\*

- Jobs as Public Health Dorset's JSNA says, "people who are in work live longer, healthier lives. Being out of work can put people at increased risk of ill health and premature death". XVIII Although the Central South does not face the scale of challenges observed elsewhere in the country, pockets of worklessness are still present. ONS data show that unemployment in the area is 3.3%, by comparison with the national average of 4.2%, although it is higher in some of our urban areas. XVIIII
- Deprivation the national indices of deprivation measures communities' income and ability to access basic needs. Deprivation creates ill-health because it forces people to live in environments that make them sick, either directly or as a consequence of the stress they face in their daily lives.

Deprivation has a significant impact on life expectancy as well as health, Public Health England suggest men in the deprived communities have their life expectancy reduced by 9 years, the figure is 7 years for women. Moreover, they may expect to live up to a third of their lives in poor health.xix

The Central South is largely prosperous, but there are pockets of deprivation in both urban and rural areas. Several parts of Bournemouth, for example, are amongst the 20% most deprived communities in England, giving rise to financial, health or other inequalities by comparison with their neighbours. The picture is starker in Southampton, Portsmouth, Reading or Slough, where inequalities are greater.\*xx

Research by the Southern Policy Centre has shown the impacts of poverty on the lives of those living in what are generally prosperous communities in the Central South.xxi

 Social isolation - even in large communities individuals can feel alone or isolated if they have limited or no contact with other people. Feeling isolated can have a significant impact on health and wellbeing, research has suggested that a lack of social connections can be comparable to smoking 15 cigarettes a day, and has worse health outcomes than risk factors such as obesity and physical inactivity. Whilst loneliness is often seen as a condition which affects older people, 6.6% of 35-44 year olds and 9.5% of 55-64 year olds in the UK report feeling lonely all or most of the time.\*

There are limited local data available on loneliness and isolation. Public Health England data suggest that over half (55%) of users of councils' adult services in the Central South have less social contact than they'd like, and that just over 12% of adults live alone. \*xiii Hampshire's JSNA highlights the challenges loneliness poses for physical and mental health. \*xxiv

## **Conclusions**

This brief overview of life in the Central South suggests that, whilst our communities are reasonably healthy and active, enjoy a good environment and opportunities to work, they face challenges. High levels of obesity, poor housing or social isolation can all stop people living well, and harm their chances for a better old age. And our data suggest that some of our larger urban areas face greater challenges than other parts of the area.

What is perhaps most important in discussing how we can live well is to recognise the complexity and inter-dependence of the various factors which shape peoples' lives: for example productive work affects physical and mental health, but a successful economy can put real pressure on local environment quality.

There are shared responsibilities for the complex mix of factors which can help us live well. Some of that is down to individuals: we can all decide what we eat or how much we exercise. Others depend on health or support from a range of organisations – from local councils to the NHS, businesses or charities.

The NHS Long Term Plan also recognises that preventing poor health is not just a task for the primary healthcare services. It also acknowledges that "a comprehensive approach to preventing ill-health also depends on action that only individuals, companies, communities and national government can take to tackle wider threats to health, and ensure health is hardwired into social and economic policy" (p.33).

The Central South is a good place to live and work. The Southern Policy Centre and University of Winchester hope that our seminar will stimulate discussion and debate about how well we live, and what we might do to improve the lives of all of our residents.

## References

- <sup>i</sup> ONS mid-year estimates for 2017
- "ONS sub-regional population projections
- iii Public Health England: Public Health Outcomes Framework
- iv The NHS Long Term Plan (January 2019)
- <sup>v</sup> Hampshire Joint Strategic Needs Assessment: Living Well chapter (2015)
- vi Public Health England: Local Authority Health Profiles
- vii Hampshire & Isle of Wight Physical Activity Strategy 2017-21
- viii Public Health England: Common Mental Health Disorders
- ix Adult Psychiatric Morbidity Survey: Mental Health and Wellbeing, England (2014)
- <sup>x</sup> National Diet and Nutrition Survey Public Health England and the Food Standards Agency (2017)
- xi Public Health England: Public Health Profiles (search diet)
- xii A Clean Air Strategy for Southampton 2016-2025 (Southampton City Council)
- xiii Public Health England: Public Health Profiles (search air quality)
- xiv Improving health through the home: Public Health England (2017)
- xv English Housing Survey, Stock Condition MHCLG (2016)
- xvi Housing Costs and the Central South's Economy Southern Policy Centre (2018)
- xvii Public Health Dorset JSNA, economy chapter (2016)
- xviii NOMIS Labour Market Statistics (October 2017-September 2018)
- xix Health Profile for England: Chapter 5, inequality in health Public Health England (2017)
- xx Data from English indices of deprivation MHCLG (2015)
- xxi Making ends meet: the lived experience of poverty in the South Southern Policy Centre (2018)
- xxii Social isolation and loneliness in the UK ioTUK (2017)
- xxiii Public Health England: Public Health Profiles (search isolation)
- xxiv Hampshire Joint Strategic Needs Assessment: Healthy Communities chapter (2015)