

EXECUTIVE SUMMARY

This document, part of the Joint Strategic Needs Assessment, is one of three Locality profiles (North, Central and South). The information at a Havering level will have been provided in documents already published on the Havering Data Intelligence Hub (<https://www.haveringdata.net/>), namely *This is Havering* and *JSNA Overview of Health and Social Care Needs*. The locality report provides information, where available, at a sub-Havering level, sometimes ward level data that has been aggregated appropriately to Locality level.

All three Localities have areas of deprivation that are in the English most deprived fifth of areas. Certain wards will already be known to be more deprived than other wards, but there will still be small pockets of deprivation across all wards and therefore all three Localities in Havering.

Medical care and treatment of serious diseases prolongs survival for all in our society, but more important for the population as a whole are the social and economic conditions that make people ill^[1]. Almost all aspects of the determinants of health follow levels of material and social disadvantage (i.e. deprivation).

The key information from the analyses at Locality level are listed in the Executive summary which follows.

Geographical Profile

- The South Locality contains 6 electoral wards.
- is mainly characterised by suburban development, but more than half of the area is dedicated to open green space and Green Belt.
- The southern part of Havering is within the London Riverside section of the Thames Gateway redevelopment area and will be an area of increasing development and population change.
- South Locality is the most affluent among all Havering Localities; Upminster and Cranham wards are the most affluent within in South Locality. There are pockets of deprivation in South Hornchurch Ward.

Population Profile

- The estimated population of South Locality in 2018 is 82,100.
- South Locality has a much older age structure for the population of the locality compared with London and slightly older compared with Havering and England.

^[1] Social determinants of health: the solid facts. 2nd edition (2003). Edited by R Wilkinson and M Marmot. WHO (Denmark).

http://www.euro.who.int/_data/assets/pdf_file/0005/98438/e81384.pdf?ua=1

- The population of South Locality is expected to increase from 82,100 in 2018 to 102,000 by 2033 (24.2% increase)
- As well as increases in the number of births in South Locality, there has been an increase in the general fertility rate (GFR)¹ from 49 (per 1,000 women aged 15-44) in 2005 to 65 in 2016. This equates to an additional 16 births per 1,000 women aged 15-44 within the period.
- The life expectancy at birth for people living in South Locality is 80.4 years for males and 84.5 years for females.
- The life expectancy at age 65 years in South Locality is 19.6 years for males and 22.4 years for females.
- South Locality is the most ethnically homogenous Locality in Havering, with around 89% of its residents recorded as White British.

Household Profile

- There are 32,291 households in South Locality, according to the Council Tax List (as at February 2017).
- Households are mainly composed of two or more adult households with or without dependent children.
- In 2011, there were 1,934 one-adult households with children under 16 in South Locality. This is an increase from 2001 when there were 1,501 lone parent households. There was also an increase in the number of one-adult households with no children.
- 82% of the population in South Locality were home owners (those who own outright and those who bought with a mortgage). This is higher than London (50%), England (65%) and Havering (77%).
- 16% (4,957) of the population in South Locality are of pensionable age and living in one-person households. 42% of all one adult households in Havering are occupied by persons of pensionable age.

Economic Profile

- The average gross household income in South Locality (£48,253), as measured in 2012/13, is slightly lower than the London average of £51,770, but slightly higher than the Havering average (£44,430) and higher than England (39,557).
- 79.5% of households in Havering have at least one car
- Majority of children in Havering are not poor, but around 8,800 live in income-deprived households. Elm Park, South Hornchurch, and Rainham and Wennington have the highest proportion of children living in poverty within the South Locality.

¹ General Fertility Rate (GFR) is defined as the number of live births in a geographic area in a year per 1,000 women of childbearing age (defined as age 15 to 44 years)

- 79% of working age residents in South Locality were in employment in 2011. Overall employment rate in South Locality is higher than London (76%) and England (77%)
- 1.4% of economically active residents within South locality were claiming job seekers allowance as at the 2011 Census and this was lower than Havering (1.9%), London (2.2%) and England (1.9%)

What will happen to the population of Havering?

- GLA projections indicate that the population of South Locality is expected to increase from 81,667 in 2017 to 91,633 in 2032 (12.2% increase)
- The population aged 25-64 will remain the largest age group up to 2032 but from 2017 to 2032, the largest increases will be seen in 85+ year olds: 51%; 11-17 year olds: 32%, and older people of 65-84 year olds: 25%.

What are the risk factors affecting ill health in South Locality?

- In 2012/13-2014/15, a quarter of South Locality children (24.2%) in Reception Year were either overweight or obese. This figure increased to a third (36.2%) of children in Year 6 - this is higher than the England average.
- Regarding adults, around one in two (55%) persons aged over 18 years registered with a General Practice (GP) in the South Locality is either overweight or obese.
- Estimates show that one in three adults (36.2%) in Havering are inactive compared with London (37.8%) and England (36.1%). The general trend in participation in sports lags behind that of Bexley (Havering comparator) and London but in the last couple of years has performed better than England. The level of activity is generally lower within the more deprived areas.
- Smoking prevalence was highest in South Hornchurch (19.4%) and Rainham and Wennington (19%); and lowest in Upminster (16.6%) which is the least deprived ward.
- Smoking in pregnancy, although on the decline, is among the highest in Havering (7.6%) compared with other London boroughs (significantly higher in Havering compared with 4.9% in London but significantly better than England, 10.7%) for 2016/17; more deprived areas within the locality are generally expected have higher rates of smoking during pregnancy.
- The majority of drinkers (73%) in Havering do not drink above the recommended limits. Although Havering had significantly lower alcohol related admissions to hospital (430 per 100,000 hospital admissions for alcohol-related conditions in comparison to London and England in 2014/15 , alcohol is implicated in 4% of ambulance call outs; 16% of road fatalities and over 70% of cases of domestic violence. Alcohol related issues are generally expected to be more pronounced in more deprived areas within the Locality.

What is the current status of health in Havering?

Mortality

- The top 5 (underlying) causes of death in South Locality (from 2012 to 2016) are: cancers, circulatory diseases, respiratory diseases, dementia & Parkinson's disease, and diseases of digestive system.
- Unspecified dementia comprises the biggest single underlying cause of death in South Locality. Lung cancers comprise the largest proportion of deaths from Cancer.
- In North Locality, about 200 deaths (26%) each year² occur prematurely (deaths that occur before a person reaches the age of 75 years). Cancer, heart disease and stroke are the main causes of premature deaths.

Long Term Conditions

- There is an increasing number of Havering residents living with long term conditions (LTCs) – this has a significant impact on daily lives including the use of urgent and emergency health and social care services.
- South Locality CCG patients with five or more LTCs are 3 times more likely to attend A&E, 13 times more likely to be admitted for an emergency, and the average number of inpatient bed days will be 22 times greater compared with patients with no LTC.
- The prevalence of depression in South Locality ranges from 56.6 per 1,000 persons aged 17 and over in Upminster to 106.1 per 1,000 persons aged 17 and over in Elm Park (i.e. more generally more common with increasing deprivation).
- In South Locality, the number of people living with diabetes is on the increase. The prevalence of diabetes in South Locality is lowest in Upminster (47.3 per 1,000 persons aged 17 and over) and highest in South Hornchurch (70.1 persons aged 17 and over).

Specific Groups

- Overweight and obesity is an issue for children in Havering, particularly in more deprived areas. They are likely to develop Type 2 Diabetes requiring long term medical care.
- South Locality has 3.8% of children going into care which is lower than the Havering average (4.6%). Looked after children generally have greater mental and physical health care needs.
- Older people are at increased risk of living with multiple long-term conditions; dementia; and experiencing falls.
- Working age adults comprise the largest age group in South Locality and are more likely to experience serious mental health issues such as depression, schizophrenia and psychoses.

² Based on the number of premature deaths over 5-year period (2012-2016) – 3,094 (Data source: ONS PCMD)

- Certain health problems are more common in BAME groups because of various reasons including diet and other lifestyle factors e.g. diabetes in South Asians; and sickle cell disease in black Africans.

How do local people use health and social care services?

Children Social Care

- The rate of children's social care activity appears to be generally lower than the Havering average across all three types of plans in the South Locality.
- The children in need activity in South Locality appears to generally follow a similar pattern to Havering across all age groups in both males and females; the highest proportion of activity is shown within the age group 10 – 14 among both males (31%) and ages 5 – 9 in females (28%).

Adult Social care

- Information and recent data are not immediately available at locality level (or smaller geographical level); this section will be updated if it becomes possible to do so.

Health Services

- The average number of patients registered with North Locality (Havering CCG) practice per GP (Full Time Equivalent, FTE) is 2,418, which is higher than Havering (2,079 patients per GP-FTE) but lower than London average (6825 patients per GP-FTE) and the England average (5252 patients per GP-FTE)
- In 2015/16, there were 13,669 elective and 6,640 emergency hospital admissions (spells) for Havering CCG-registered patients³ within a Central Locality Practice. Only the top 5 causes of Elective Admissions and Emergency Admissions account for 69% and 68% respectively.
- People living in the more deprived parts of the borough are more likely to use A&E services than those from least deprived areas in Havering.

³ Secondary Uses Services (SUS)