INTEGRATED CARE PARTNERSHIP FOR HAVERING

SOUTH Locality profile

2018

Demographic, Socio-economic and Health and Social care Overview

Key Facts and Figures

By London Borough of Havering Public Health Service

Version 2.0 (September, 2018)

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DOCUMENT VERSION CONTROL

Version	Description
1.0	❖ Published April 2017
2.0	❖ Published September 2018

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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.

• The population of South Locality is expected to increase from 82,100 in 2018 to 102,000 by 2033 (24.2% increase)

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[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

- 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.
- 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%)

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[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)*

- 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.

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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 year[2] 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.
- 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.

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

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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 patients[3] 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.

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[3] *Secondary Uses Services (SUS)*

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1   BACKGROUND

This product forms part of the Joint Strategic Needs Assessment (JSNA). The JSNA is a systematic method for reviewing the issues facing a population, leading to agreed priorities and resource allocation that will improve health and wellbeing of the population and reduce inequalities within the population.

In addition, this resource is mainly to support the Integrated Care Partnership (ICP) agenda for Havering. The ICP is focused on working to tackle the significant challenges the health and wellbeing system faces and the struggles of the existing model of commissioning and providing prevention and care in meeting the current levels of demand as a result of various pressure points (such as population growth, rising levels of long term conditions, variable levels of deprivation, and a constrained financial situation). It builds on devolution opportunities and the development of a Strategic Outline Case for Barking & Dagenham, Havering and Redbridge (BHR) boroughs, which recommends a strengthening of partnership governance arrangements, strategic commissioning and a locality delivery model of care.

There is evidence that a good way to meet the needs of our people is through development of a new locality delivery model. The locality delivery model integrates health and wellbeing services for the local population (based on place-based care) and presents the opportunity of a more intelligent way of delivering health and social care that is built around a defined population rather than around institutions, with a focus on delivering better outcomes. Each BHR borough is developing this locality model locally, under the guidance of the Integrated Care Partnership (ICP).

In Havering, three localities have been agreed and are being developed. This document, therefore, aims to give readers a high level understanding of the population of one of Havering's three localities – the South Locality. It describes the South Locality's key geographic, demographic and socio-economic facts and figures and provides an overview of health and social care needs (including the pattern of risk factors for ill health, the status of health and wellbeing and how people use local services) within the locality.

From this understanding (of population growth and dynamics, prevalence of risk factors for ill health across the locality, and the patterns of demand for health and social care services), all local stakeholders will understand the following changes that need to be made:
- Prevention needs to be prioritised in order to reduce The prevalence of risk factors in the population particularly in the more deprived parts of the locality.
- A reduction in risk factors will mean a reduction in the number of people who develop long term conditions; less people with multiple co-morbidities; reduced demand for more expensive and complex packages of care; and longer lives free of disability.

- Targeting high-risk population groups will ensure efficient use of limited resources and in the longer term reduce health inequalities.

This profile provides, in many cases, how the South Locality values compare to national (England), regional (London) and borough (Havering) values. The choice of comparators for individual values or indicators is based on a number of factors including appropriateness and data availability. A summary of what is covered in this document is presented in Figure 1.

Figure 1: Summary of contents

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- Deprivation

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- Adults Social Care
- Primary Health Care

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2 Geographical Profile

2.1 Geographical Location

The South Locality (SL) comprises of six southern wards in Havering: Cranham, Elm Park, Hacton, Rainham and Wennington, South Hornchurch, and Upminster (see

Figure 2). The SL is mainly characterised by suburban development, but more than half of the area is dedicated to open green space and Green Belt (see Figure 3)

Figure 2: Map of Havering with the South Locality highlighted

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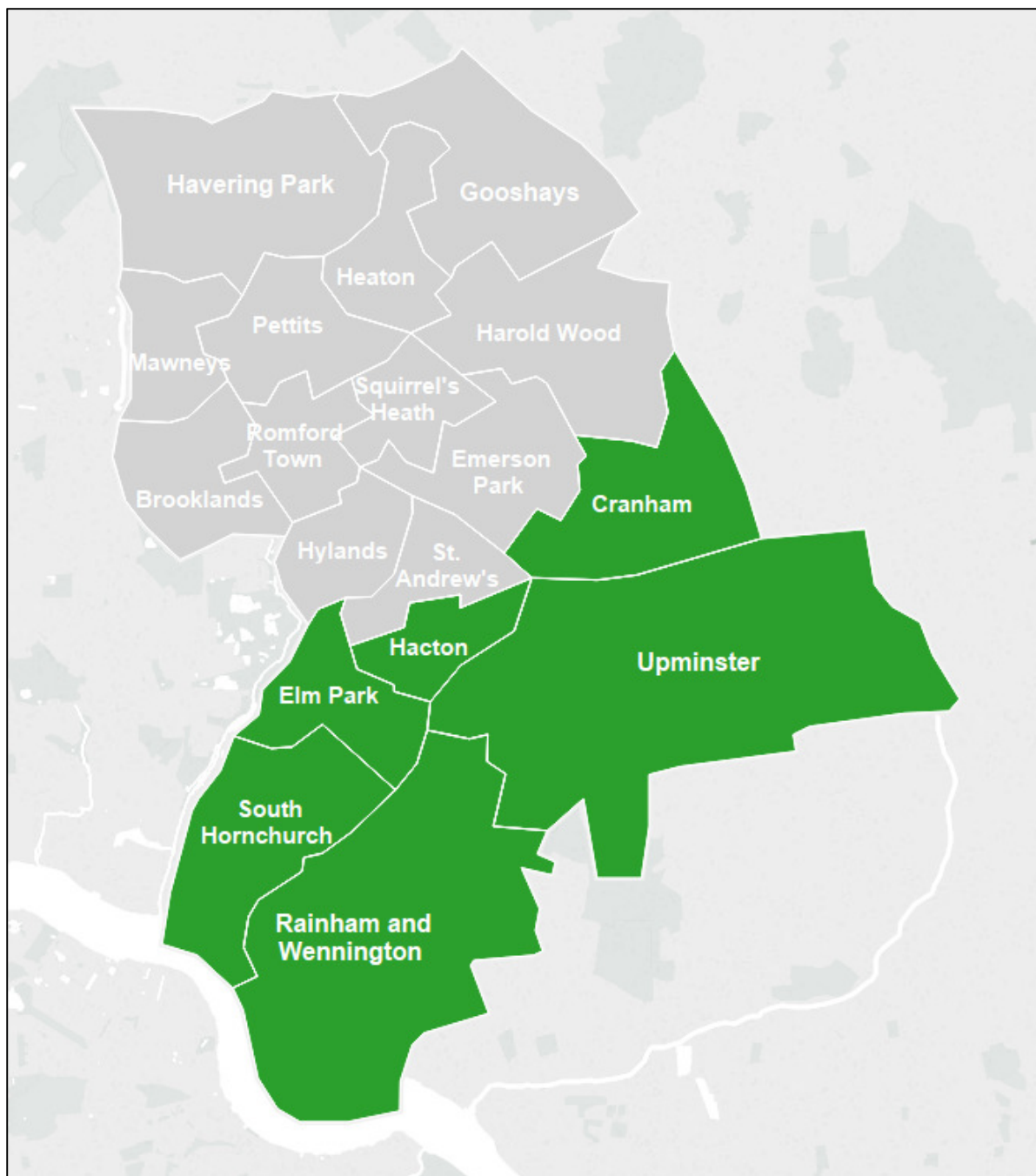
The SL, adjacent to the Thames, is within the London Riverside section of the Thames Gateway redevelopment area. This will therefore be a site of increasing development and population change.

Figure 3: Green belt land, public parks and green spaces, Havering 2013
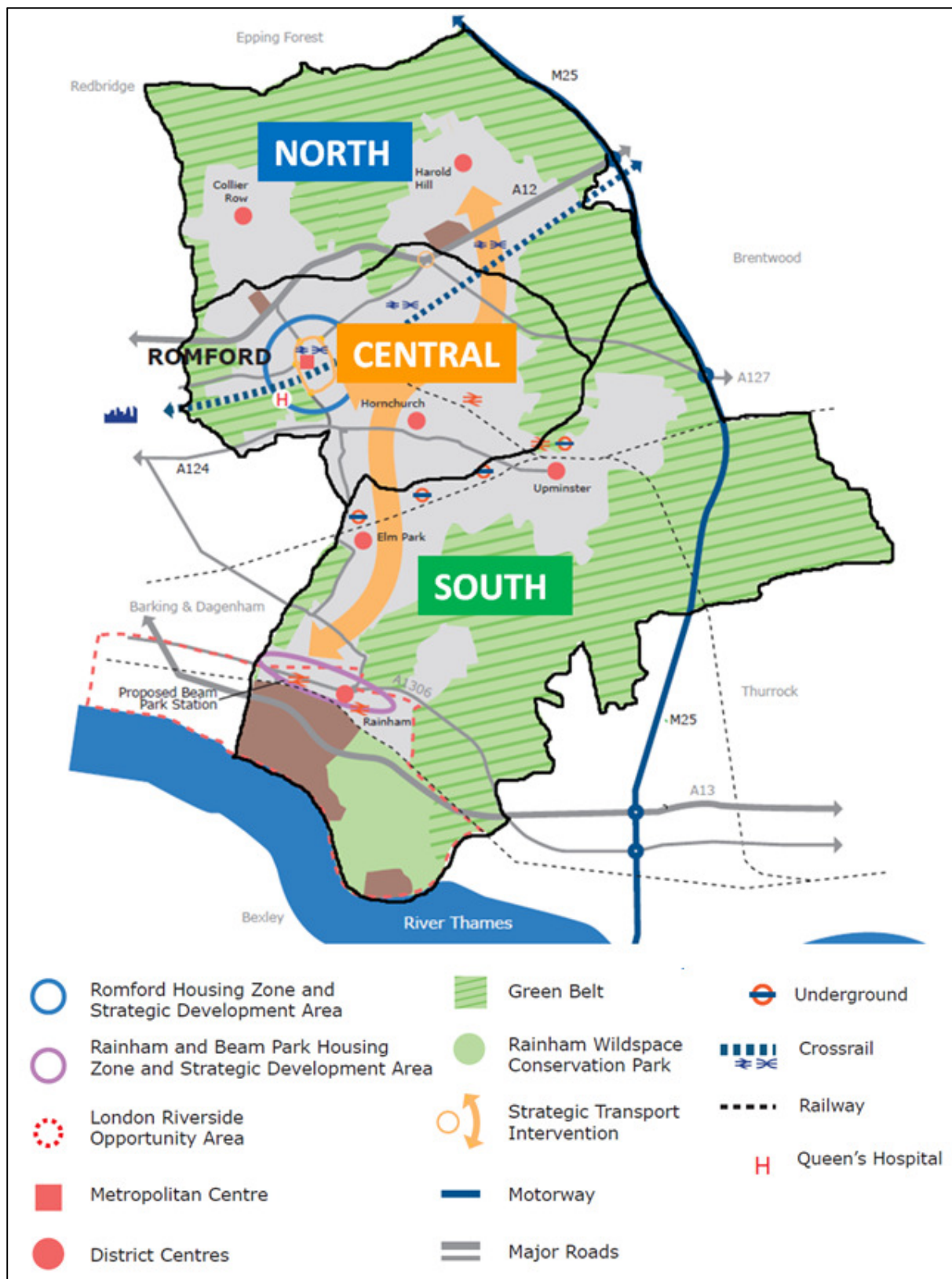
Data Source: Local Land and Property Gazetteer (LLPG);

The two largest wards in the South Locality (Upminster and Rainham and Wennington) are also the least densely populated in the whole borough (6 and 8 persons per hectare respectively) due to Green Belt restrictions. Hacton ward is the most densely populated area in South Locality (and also in the most densely populated quintile within Havering) – see Figure 4.
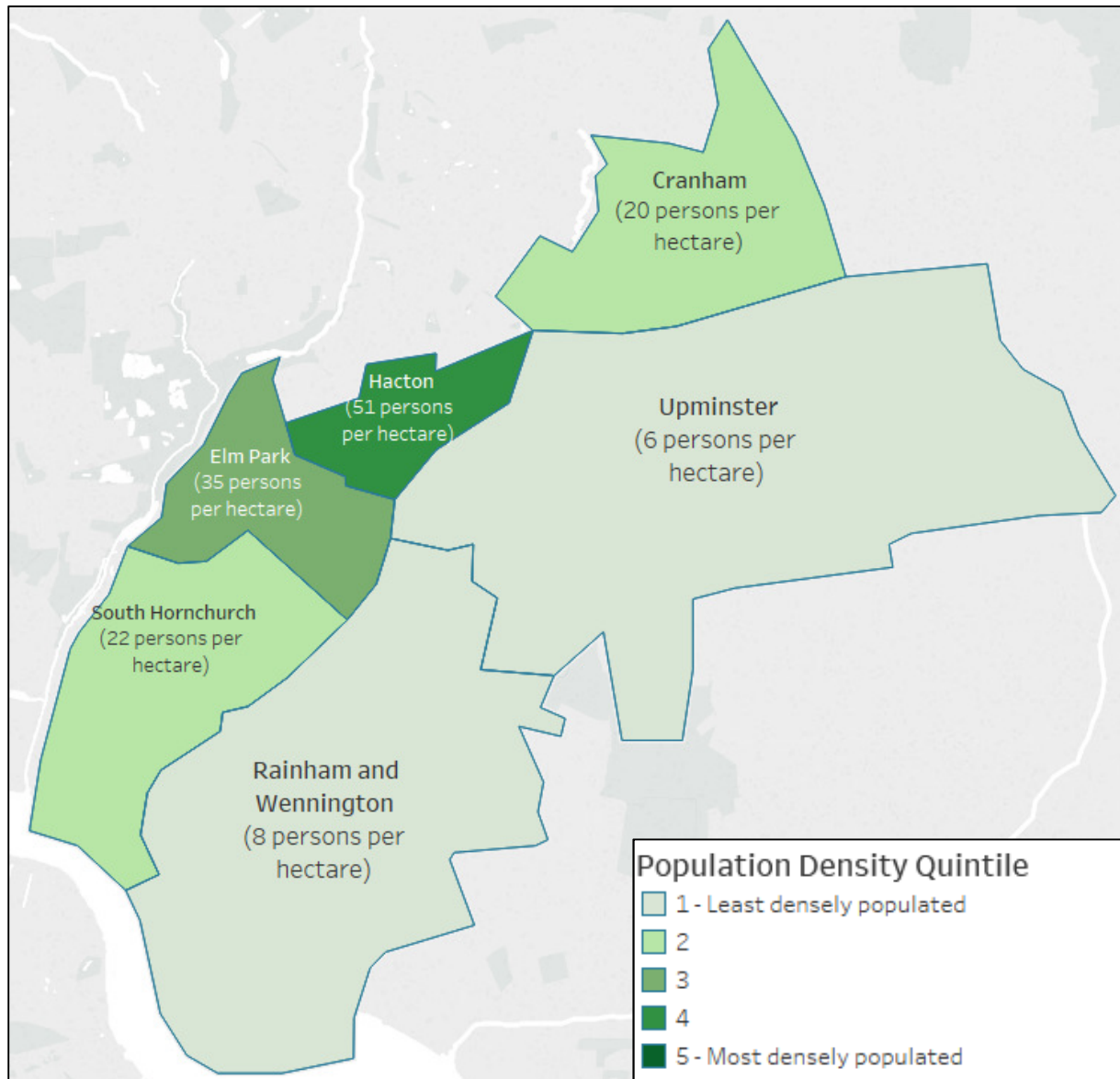
Data Source: United Kingdom Standard Area of Measurements and Ward Mid-year population Estimates 2014; Office for National Statistics (ONS); Produced by Public Health Intelligence

2.2 Deprivation

People who live in the most deprived areas have the poorest health and well-being outcomes. On average people living in deprived areas, lower socio-economic groups and marginalised groups have poorer health and poorer access to health care than people resident in affluent areas and people from higher socio-economic groups.

Havering is a relatively affluent borough (based on the Index of Multiple Deprivation 2015[4])[5], there are pockets of deprivation in the borough. This pattern is reflected in the South Locality – it is the most affluent Havering locality but has pockets of deprivation, as measured by the Lower Super Output Areas (LSOAs)[6], which are mainly found in South Hornchurch. Upminster is the locality's (and the borough's) most affluent area (see Figure 5).

Figure 5: Index of Multiple Deprivation (IMD) 2015 quintiles, by South Locality LSOAs
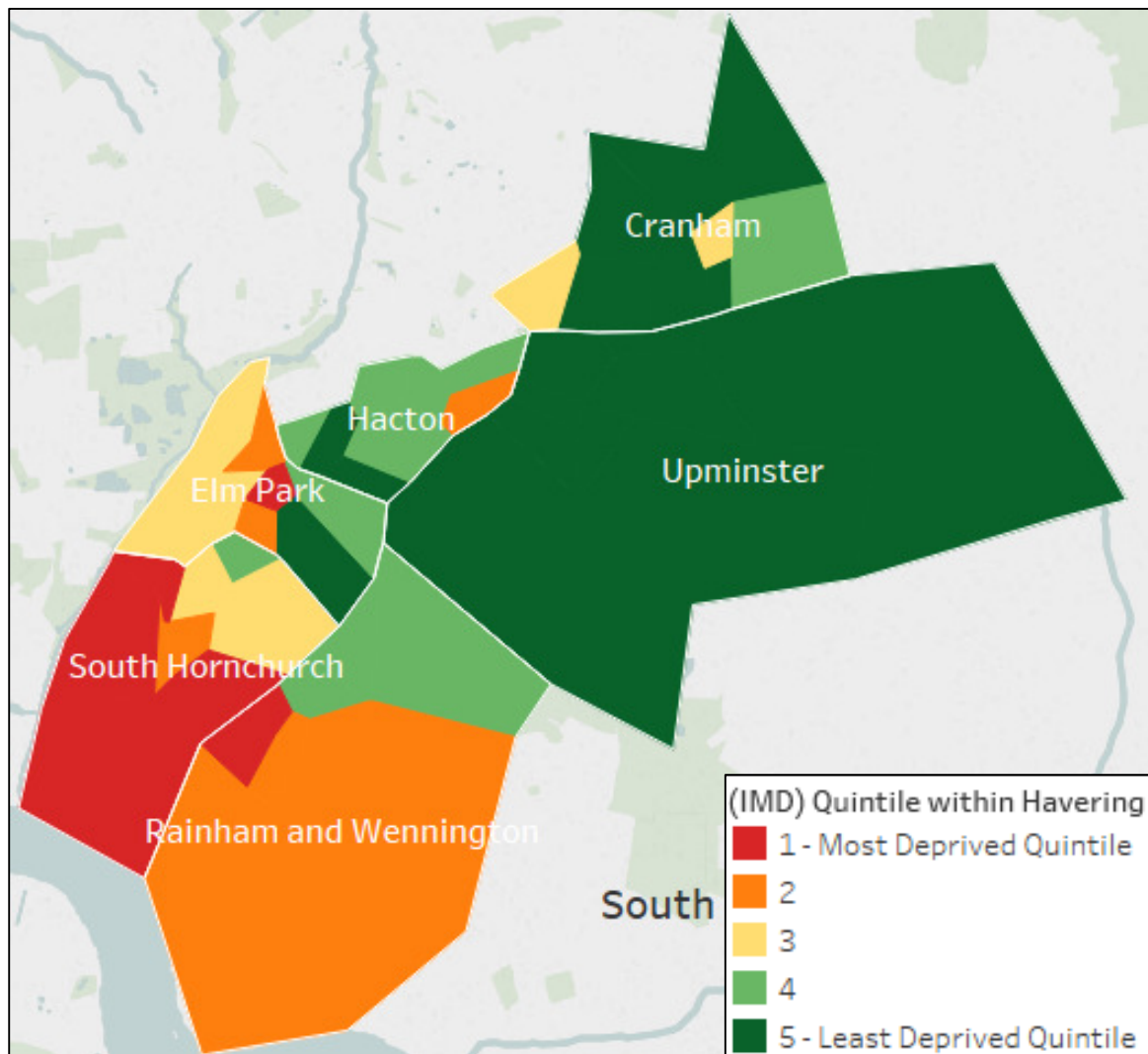
Data source: Indices of Multiple Deprivation, 2015 (IMD, 2015); Department for Communities and Local Government (DCLG), Produced by Public Health Intelligence

[4] In September 2015, the Department for Communities and Local Government (CLG) published the English Indices of Multiple Deprivation 2015 (IMD 2015). This includes county and district summary measures, and a series of separate domains and other measures at the level of Lower Super Output Area (LSOA).

[5] Havering is ranked 166th overall out of 326 local authorities in England for deprivation – 1st being most deprived, 326th being least deprived)

[6] LSOA - Lower Layer Super Output Areas are a geographic hierarchy used by Office for National Statistics (ONS) to improve the reporting of small area statistics. They are built from groups of contiguous Output Areas and have been automatically generated to be as consistent in population size as possible, and typically contain from four to six Output Areas. The minimum population is 1,000 and the mean is 1500.

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3   Population Profile

According to ONS 2016 mid-year estimates, the population of the South Locality is 78,908. These include people usually resident[7] in Havering (including students at their term time address and long-term migrants[8]).

3.1 Havering's Age Profile

Table 1 shows the breakdown of estimated mid 2016 estimated population by gender and five-year age bands and the population pyramid in Figure 6 compares the population figures for South Locality with Havering, London and England by five-year age bands. It shows a much older age structure for the population of the locality compared with London and slightly older than Havering and England.

Table 1: Estimated population of residents in Havering South Locality by gender and five-year age group

AGE BAND (YEARS)	MALES	FEMALES	PERSONS
0-4	2383	2371	4754
5-9	2475	2204	4679
10-14	2233	2270	4503
15-19	2323	2203	4526
20-24	2351	2162	4513
25-29	2324	2369	4693
30-34	2211	2382	4593
35-39	2220	2528	4748
40-44	2362	2429	4791
45-49	2594	2853	5447
50-54	2776	3087	5863
55-59	2680	2596	5276
60-64	2092	2191	4283
65-69	2154	2295	4449
70-74	1631	1920	3551
75-79	1220	1771	2991
80-84	1082	1549	2631
85-89	676	1109	1785
90+	244	588	832
Total	38031	40877	78908

Data source: Mid-year population estimates 2016; Office for National Statistics (ONS);

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[7] anyone who is resident and had stayed or intends to stay for a period of 12 months or more, OR has a permanent address and is outside the UK and intends to be outside the UK for less than 12 months.

[8] those coming to the United Kingdom (UK) for more than a year.

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Figure 6: South Locality, Havering, England and London Mid-2016 Population Pyramid
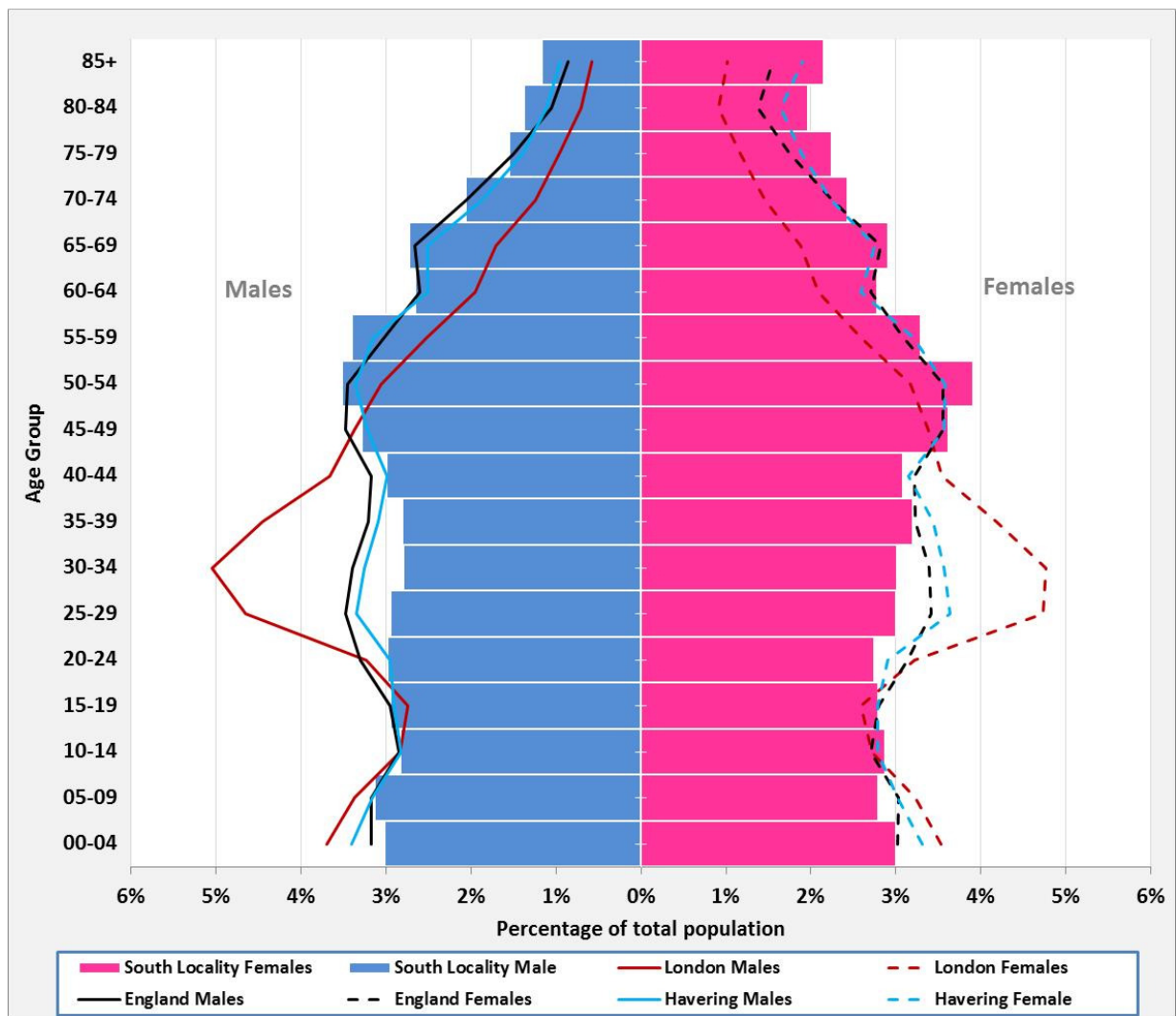
Data source: Mid-year population estimates 2016, Office for National Statistics (ONS); Produced by Public Health Intelligence

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3.2 Ward Level Change

Population change by wards within South Locality from 2015 to 2016 is presented in Table 2. Hacton saw a decline in population whereas all other wards experienced an increase. Rainham and Wennington experienced the highest percentage increase in population at 1.77% (Table 2).

A Ward level breakdown of population projections within South Locality reveals that South Hornchurch is projected to have the highest percentage increase in population from 2018 to 2033 at 62.8%; whereas Cranham Ward is projected to have minimal changes at a 7.5% projected increase in population (Table 3).

Table 2: Population change from 2014 to 2015, by Wards within South Locality

	Mid-2015 Population	Mid- 2016 Population	Change	%Change		Rank of % Change (1 is highest, 18 is lowest)
HAVERING	249,085	252,783	**3,698**		**1.48%**	-
South Locality	78,279	78,908	**629**		**0.80%**	
Rainham and Wennington	12,964	13,193	**229**		**1.77%**	6
South Hornchurch	14,100	14,343	**243**		**1.72%**	7
Elm Park	13,055	13,235	**180**		**1.38%**	10
Cranham	12,729	12,879	**150**		**1.18%**	11
Upminster	13,089	13,146	**57**		**0.44%**	13
Hacton	12,342	12,112	**-230**		**-1.86%**	18

Data source: Ward-level Mid-year population estimates 2014 and Ward-level Mid-year population estimates 2015; Office of National Statistics (ONS); produced by Public Health Intelligence

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Table 3: Projected population for 2018, 2023, 2028 and 2033 and projected percentage population change from 2018 to 2023, 2028 and 2033, by South Locality wards

Area (Havering, Locality and Ward)	2018	2023		2028		2033	
	No.	No.	% change from 2018	No.	% change from 2018	No.	% change from 2018
HAVERING	260,400	280,100	7.6%	298,600	14.7%	308,500	18.5%
SOUTH LOCALITY	82100	89950	9.6%	97900	19.2%	102000	24.2%
Elm Park	13,600	14,450	6.3%	15,100	11.0%	15,500	14.0%
Cranham	13,350	13,850	3.7%	14,250	6.7%	14,350	7.5%
Hacton	12,750	13,600	6.7%	15,000	17.6%	16,000	25.5%
Rainham and Wennington	13,250	13,700	3.4%	14,200	7.2%	14,600	10.2%
South Hornchurch	15,600	19,950	27.9%	23,850	52.9%	25,400	62.8%
Upminster	13,550	14,400	6.3%	15,500	14.4%	16,150	19.2%

Data source: 2016 Round Strategic Housing Land Availability Assessment (SHLAA)-Based Projections; Greater London Authority (GLA); Produced by Public Health Intelligence

3.3 Projected Population Change

GLA projections indicate that the population of South Locality is expected to increase from 82,100 in 2018 to 102,000 by 2033 (24.2% increase) shown in Figure 7.

Figure 7: Projected population change in South Locality from 2018 to 2033
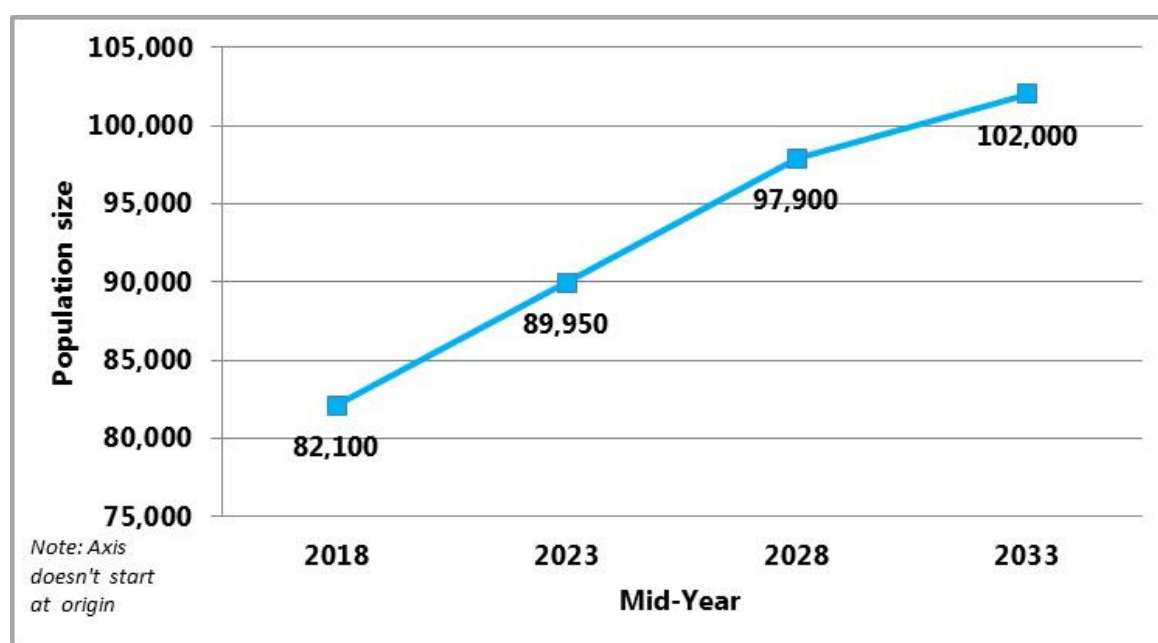
Data Source: Greater London Authority (GLA) Population Projections 2016

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Figure 8: Projected population growth by age group (to nearest hundred), 2018, 2023, 2028 and 2033
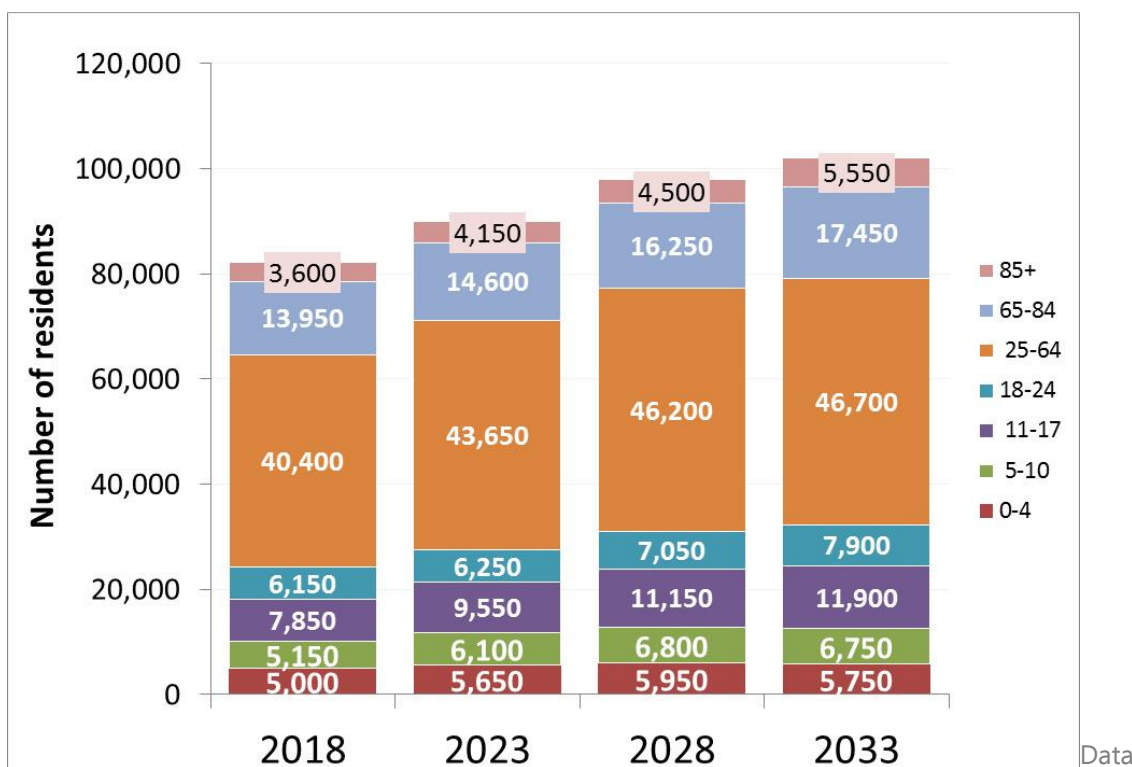
Data source: 2016 Round Strategic Housing Land Availability Assessment (SHLAA)-Based Projections; Greater London Authority (GLA); Produced by Public Health Intelligence

The population aged 25-64 will remain the largest age group up to 2033 but from 2018 to 2033, the largest increases will be seen in 85+ year olds: 54%; 11-17 year olds: 52%, and 5-10 year old children: 31%.

Table 4: Projected percentage population change in South Locality by age group since 2018, for 2023, 2028 and 2033

Age Group	Percentage change from 2017 to:		
	2023	2028	2033
0-4	13%	19%	15%
5-10	18%	32%	31%
11-17	22%	42%	52%
18-24	2%	15%	28%
25-64	8%	14%	16%
65-84	5%	16%	25%
85+	15%	25%	54%

Data source: GLA 2016-based Demographic Projections – Local Authority population projection Housing-led Model; Greater London Authority (GLA); Produced by Public Health Intelligence

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3.4 Births and Migration of Children

As well as increases in the number of births in South Locality, there has been an increase in the general fertility rate (GFR)[9] 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 annual GFR for South Locality (compared with Havering, England and London is presented in Figure 9.

Figure 9: Trend in general fertility rate of women residents in South Locality, Havering, London and England; 2005 to 2016
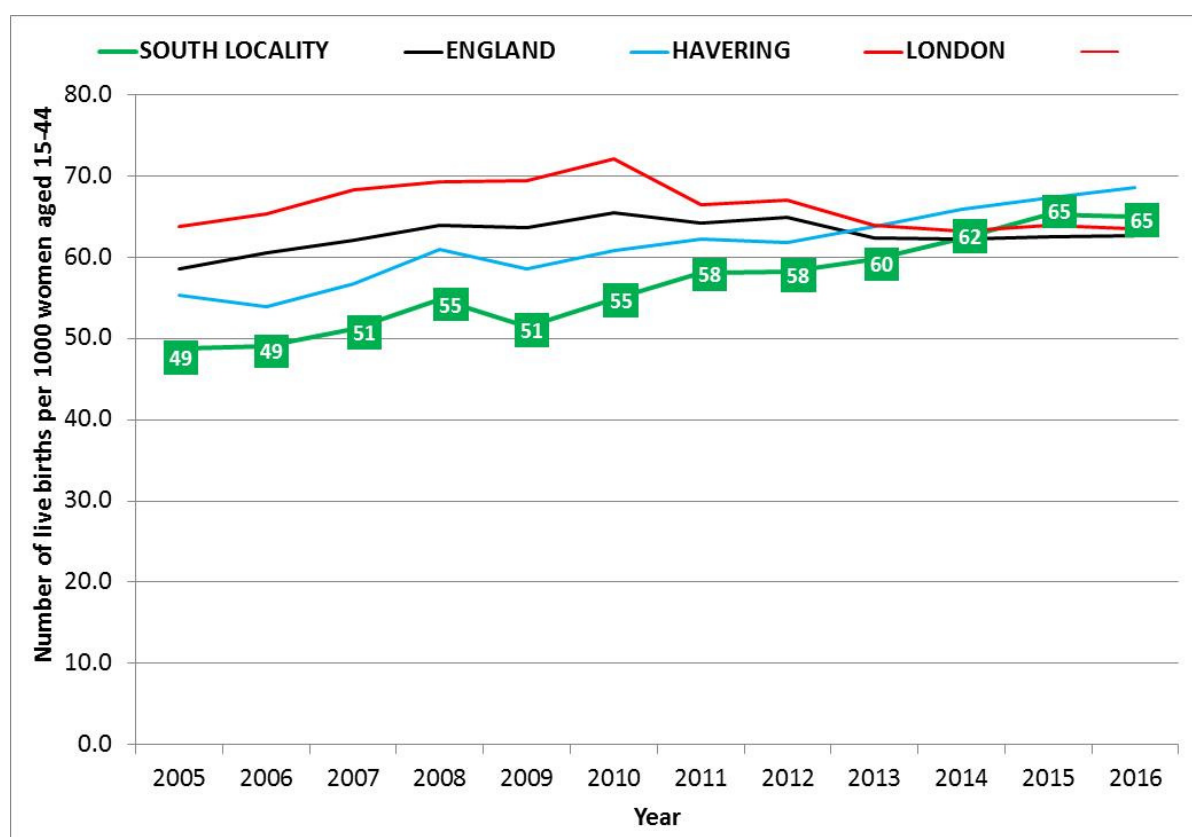
Data source: Live Births, General Fertility Rates and Total Fertility Rates 2005-2016; Office for National Statistics (ONS) & PHOF; Produced by Public Health Intelligence

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[9] 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)

3.5 Life Expectancy

The life expectancy[10] for people living in South Locality is 80.4 years (for males) and 84.5 years (for females) from birth. Life expectancy in Havering has been mostly higher than the England average and has been on the increase over the last decade, however Central locality has seen a slight decrease in the recent years (see Figure 10). The life expectancy for females is significantly higher than males.

Figure 10: Life expectancy at birth, by gender, South Locality compared with Havering, London and England, 5-year rolling periods, 2002-06 to 2011-15
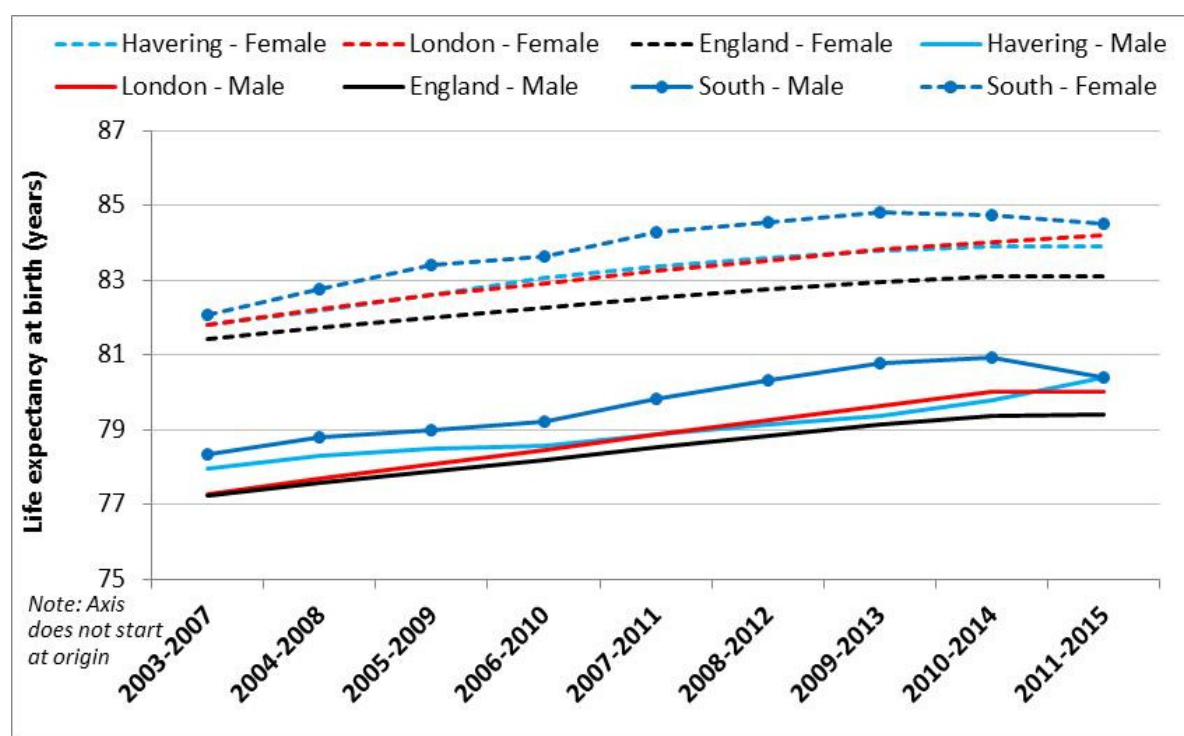
Data source: Life Expectancy at Bith, 2002-2006 to 2011-2015; Office for National Statistics (ONS); Produced by Public Health Intelligence

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[10] *Life expectancy is a frequently used indicator of the overall health of a population: a longer life expectancy is generally a reflection of better health. Reducing the differences in life expectancy is a key part of reducing health inequalities. Life expectancy at birth for an area is an estimate of how long, on average, babies born today may live if she or he experienced that area's age-specific mortality rates for that time period throughout her or his life.*

Figure 11: Life expectancy at age 65 (years), by gender, South Locality compared with Havering, London and England, 5-year rolling periods, 2002-06 to 2010-14
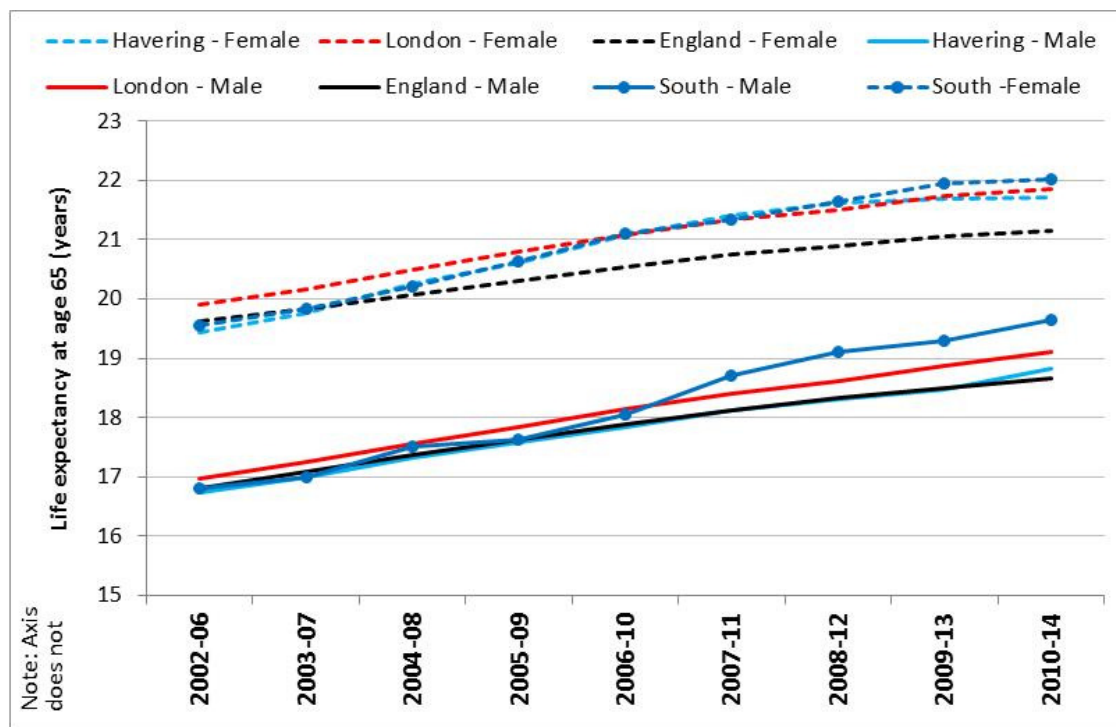
Data source: Life Expectancy at 65, 2001-2003 to 2012-2014; Office for National Statistics (ONS); Produced by Public Health Intelligence

3.6 Ethnicity

South Locality is the most ethnically homogenous Locality in Havering, with around 89% of its residents recorded as White British; This is similar to Havering (88%) but higher than both London and England. About 90% of the borough population were born in the United Kingdom.

Figure 12: Number and proportion of residents that are white and Black, Asian and Minority Ethnic (BAME) and breakdown of BAME within Havering and South locality
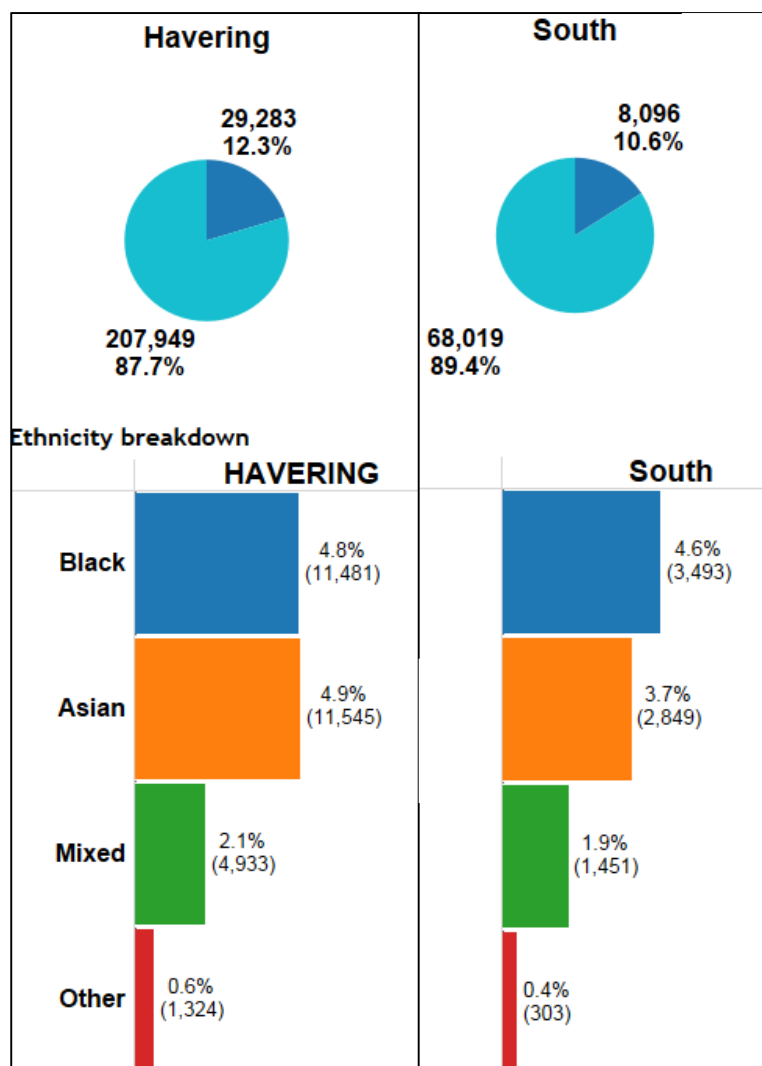
Data source: Office of National Statistics ONS 2011 Census; Produced by Public Health Intelligence

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Figure 13: Percentage of people stating their ethnicity as not White (all non-White categories) in South Locality, by wards
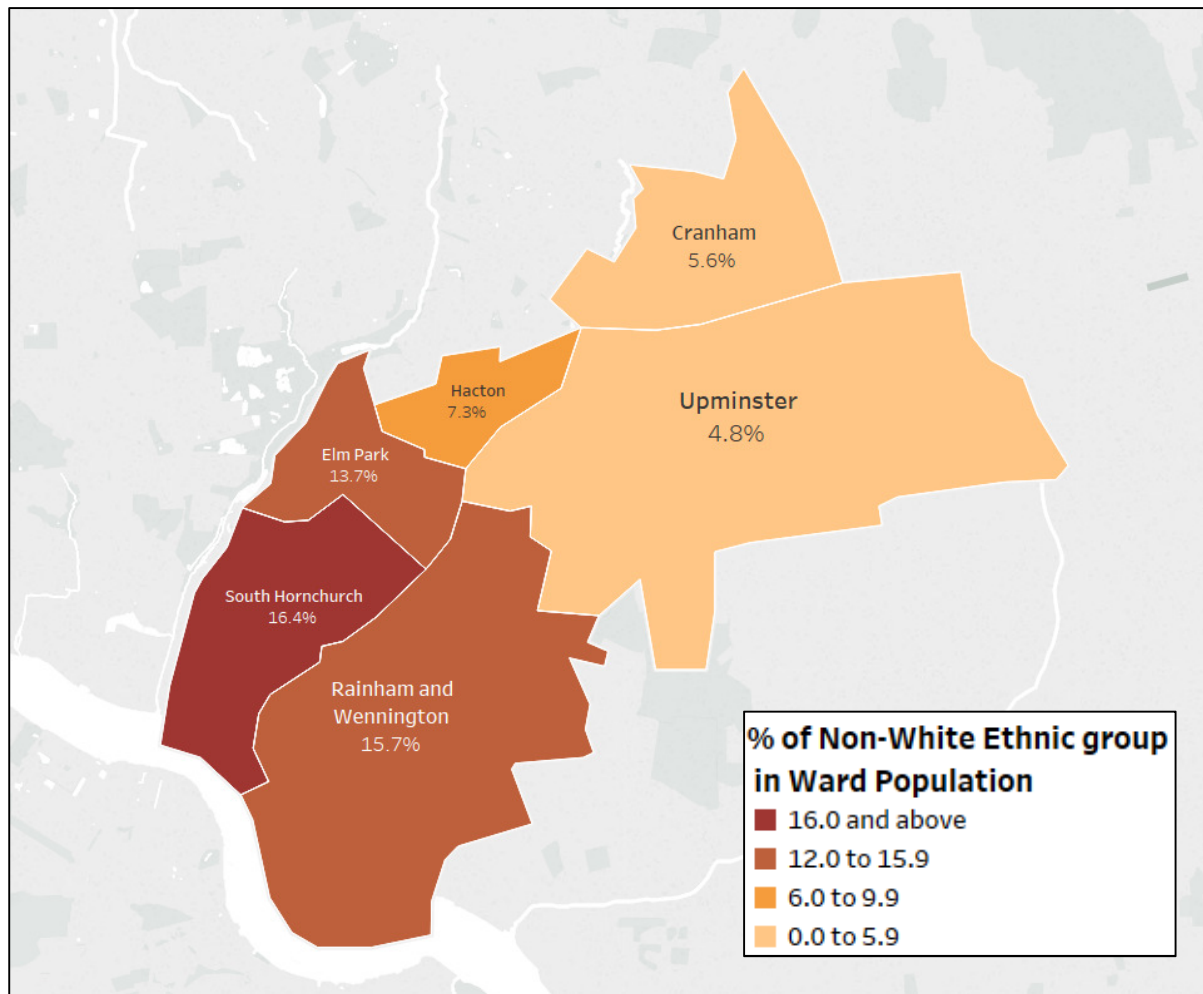
Data source: Census 2011; Office for National Statistics (ONS); Produced by Public Health Intelligence

The 2011 Census data reveals that within South Locality there is some variation with regards to proportion of non-white ethnic populations. South Hornchurch Ward has the highest proportion (16.4%) whereas Upminster and Cranham have the lowest proportions (4.8% and 5.6% respectively)Figure 13.

3.7 Religion

Figure 14: Proportion of residents by religion, South Locality, Havering, London and England, 2011

South Locality	Christian 69%	No Religion 21%	Not Stated 6%
HAVERING	Christian 66%	No Religion 23%	Not Stated 7% / Muslim (2%)
LONDON	Christian 48%	No Religion 21% / Muslim 12%	Not Stated 8% / Buddhist, Jewish, Other Religion and 1 more
ENGLAND	Christian 59%	No Religion 25%	Not Stated 7% / Muslim 5%

Data Source: Office of National Statistics (ONS) Census 2011

According to the 2011 Census, Christianity was the most widely accepted religion (69%) in the South Locality similar to Havering (66%), noticeably higher compared with England (59%) and especially London (48%). The second largest representative was no religion at 21% and this was similar to Havering (23%), London (21%) and slightly less than England (25%).

4 Household Profile

4.1 Household Size

Figure 15: Distribution of household compositions in South Locality by Census years
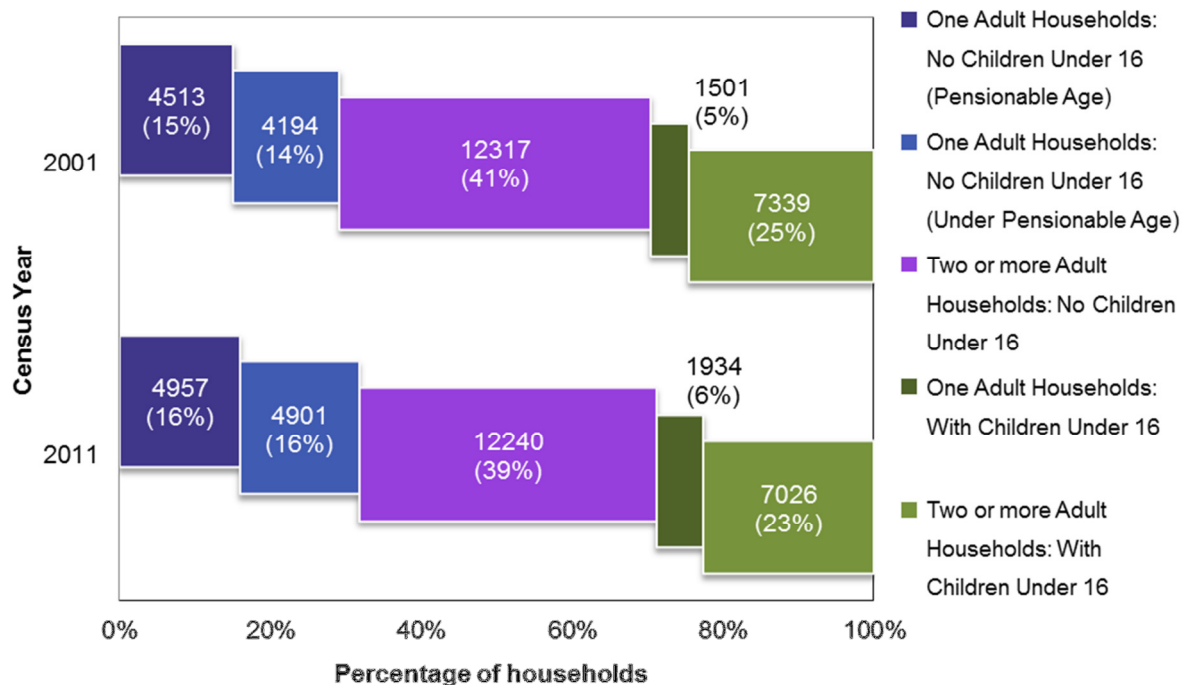
Office of National Statistics (ONS Census 2011)

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. 16% (4,957) of the population 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.

A breakdown of household size by Wards within South Locality, Havering, London and England is presented in Figure 16.

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Figure 16: Distribution of household compositions in South Locality by ward, 2011

Ward	One Adult (Under Pensionable)	One Adult 65+ (Pensionable)	Two+ Adult No Children	One Adult With Children	Two+ Adult With Children
ENGLAND	4,707,466 (21%)	2,725,596 (12%)	8,206,365 (37%)	1,573,255 (7%)	4,850,686 (22%)
LONDON	853,014 (26%)	312,022 (10%)	1,091,294 (33%)	278,986 (9%)	730,857 (22%)
HAVERING	18,933 (19%)	13,499 (14%)	35,526 (37%)	7,224 (7%)	22,017 (23%)
SOUTH LOCALITY	4,901 (16%)	4,957 (16%)	12,240 (39%)	1,934 (6%)	7,026 (23%)
Cranham	671 (13%)	946 (18%)	2,067 (40%)	258 (5%)	1,236 (24%)
Elm Park	872 (17%)	855 (17%)	1,904 (37%)	413 (8%)	1,083 (21%)
Hacton	777 (16%)	715 (14%)	2,069 (42%)	261 (5%)	1,142 (23%)
Rainham and Wennington	899 (18%)	663 (13%)	1,862 (37%)	467 (9%)	1,104 (22%)
South Hornchurch	1,143 (21%)	707 (13%)	1,827 (34%)	543 (10%)	1,218 (22%)
Upminster	664 (13%)	759 (15%)	2,213 (43%)	176 (3%)	1,281 (25%)

% of Ward Households

Indicator Description

- Two or more Adult Households: With Children Under16
- One Adult Households: With children under16
- Two or more Adult Households: No Children Under16
- One Adult Households Aged 65 and Over: No Children Under16 (Pensionable Age)
- One Adult Households Aged 65 and Over: No Children Under16 (Under Pensionable Age)

Data source: Adapted from Census 2011[11], Office for National Statistics (ONS); Produced by Public Health Intelligence

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[11] **Category here:** Categories in Census 2011 data (KS105EW)

One Adult Households: No children under 16 (Pensionable age): One Person Household; Aged 65 and Over

One Adult Households: No children under 16 (Under Pensionable age): One Person Household; Other AND One Family Only; Lone Parent; All Children Non-Dependent

One Adult Households: With children under 16: One Family Only; Lone Parent; Dependent Children

Two or more Adult Households: No Children Under 16: One Family Only; All Aged 65 and Over AND One Family Only; Married or Same-Sex Civil Partnership Couple; No Children AND One Family Only; Married or Same-Sex Civil Partnership Couple; All Children Non-Dependent AND One Family Only; Cohabiting Couple; No Children AND One Family Only; Cohabiting Couple; All Children Non-Dependent AND Other Household Types; All Full-Time Students AND Other Household Types; All Aged 65 and Over AND Other Household Types; Other

Two or more Adult Households: With Children Under 16: One Family Only; Married or Same-Sex Civil Partnership Couple; Dependent Children AND One Family Only; Cohabiting Couple; Dependent Children AND Other Household Types; With Dependent Children

4.2 Mosaic Groups

Mosaic is a product built by Experian to help understand what types of people live in the UK. Figure 17 below presents the most common Mosaic Groups in South Locality – the size of the bubbles indicates the percentage of the resident population in Havering that falls within each group.

Figure 17: Household* Mosaic Groups in Havering South Locality, 2016
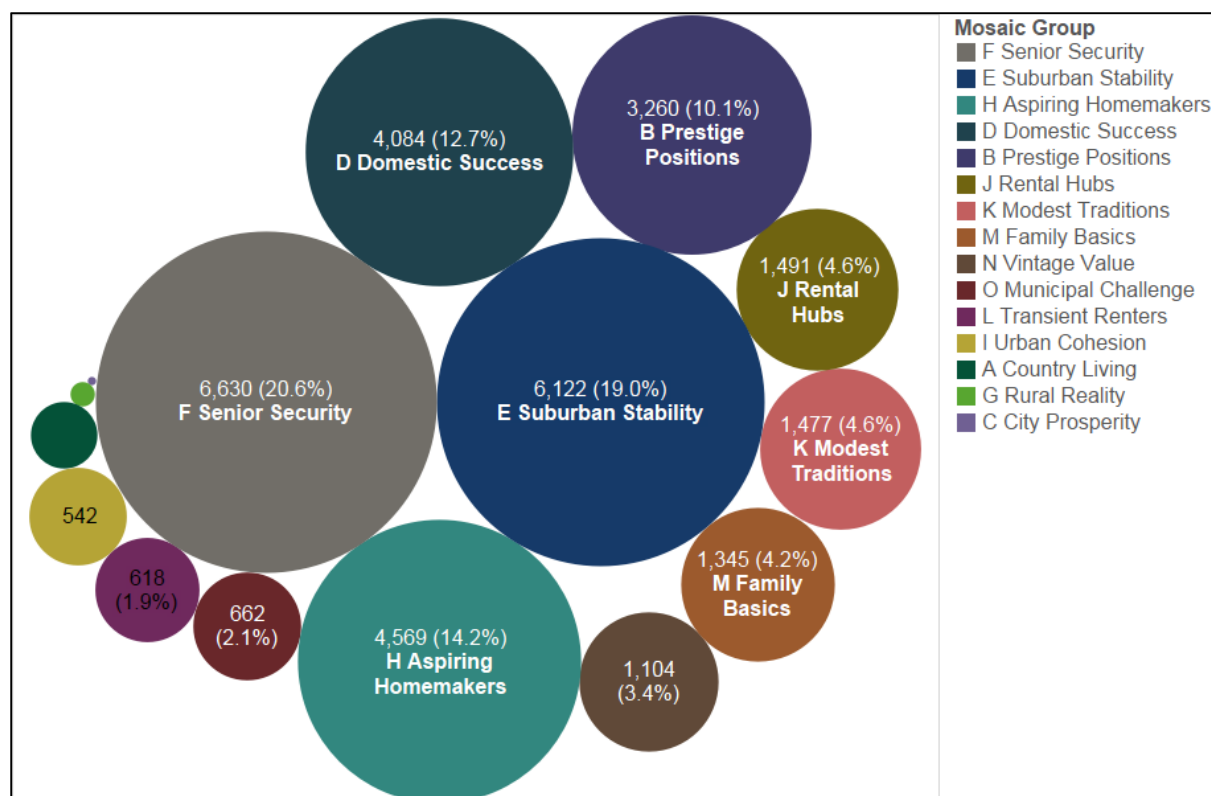
The Household Mosaic Group has been used for the vast majority of all households. However, in a minority of cases (268 out of 103,470 in Havering), where there was no designated Household Mosaic Group, the Postcode Mosaic Group was used.

Data Source: Experian's Mosaic Public Sector 2016; Produced by Public Health Intelligence

Table 5: Top 5 Household* Mosaic groups in Havering South Locality, 2016

Group – Name	Typical Profile Picture	One Line Description	Key Features
F – Senior Security		Elderly people with assets who are enjoying a comfortable retirement	• Elderly singles and couples • Homeowners • Comfortable homes • Additional pensions above state • Don't like new technology • Low mileage drivers

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Group – Name	Typical Profile Picture	One Line Description	Key Features
E – Suburban Stability		Mature suburban owners living settled lives in mid-range housing	• Older families • Some adult children at home • Suburban mid-range homes • 3 bedrooms • Have lived at same address some years • Research on Internet
H – Aspiring Homemakers		Younger households settling down in housing priced within their means	• Younger households • Full-time employment • Private suburbs • Affordable housing costs • Starter salaries • Buy and sell on eBay
B – Prestige Positions		Established families in large detached homes living upmarket lifestyles	• High value detached homes • Married couples • Managerial and senior positions • Supporting students and older children • High assets and investments • Online shopping and banking
D – Domestic Success		Thriving families who are busy bringing up children and following careers	• Families with children • Upmarket suburban homes • Owned with a mortgage • 3 or 4 bedrooms • High Internet use • Own new technology

* The Household Mosaic Group has been used for the vast majority of all households. However, in a minority of cases (268 out of 103,470 in Havering), where there was no designated Household Mosaic Group, the Postcode Mosaic Group was used.

Data Source: Experian's Mosaic Public Sector 2016; Produced by Public Health Intelligence

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4.3 Housing Tenure

Housing tenure refers to the financial arrangements under which someone has the right to live in a house or apartment.

The 2011 ONS census suggested that about 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 Havering (77%), London (50%) and England (65%). A comparison of housing tenure across London is provided in Figure 18 below.

Figure 18: Proportion of households by housing tenure, South Locality, Wards within South Locality, Havering, London and England, 2011
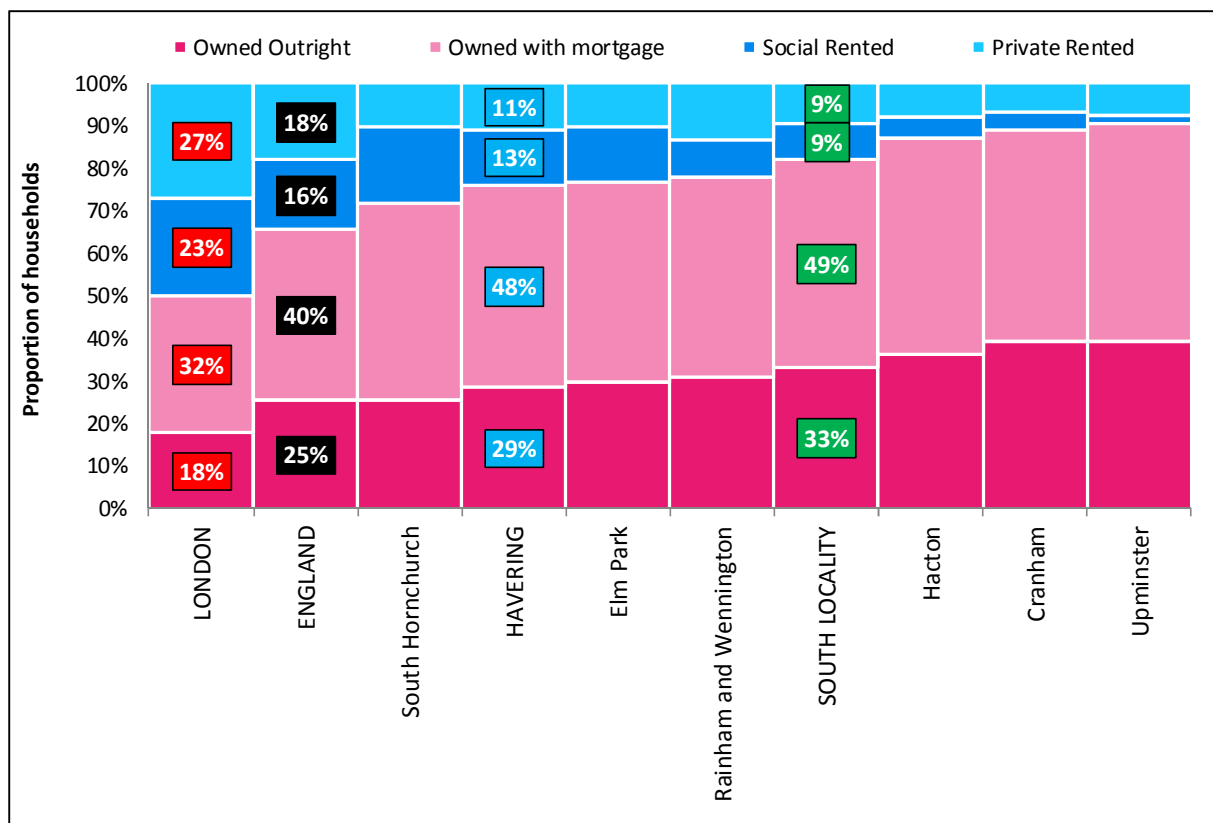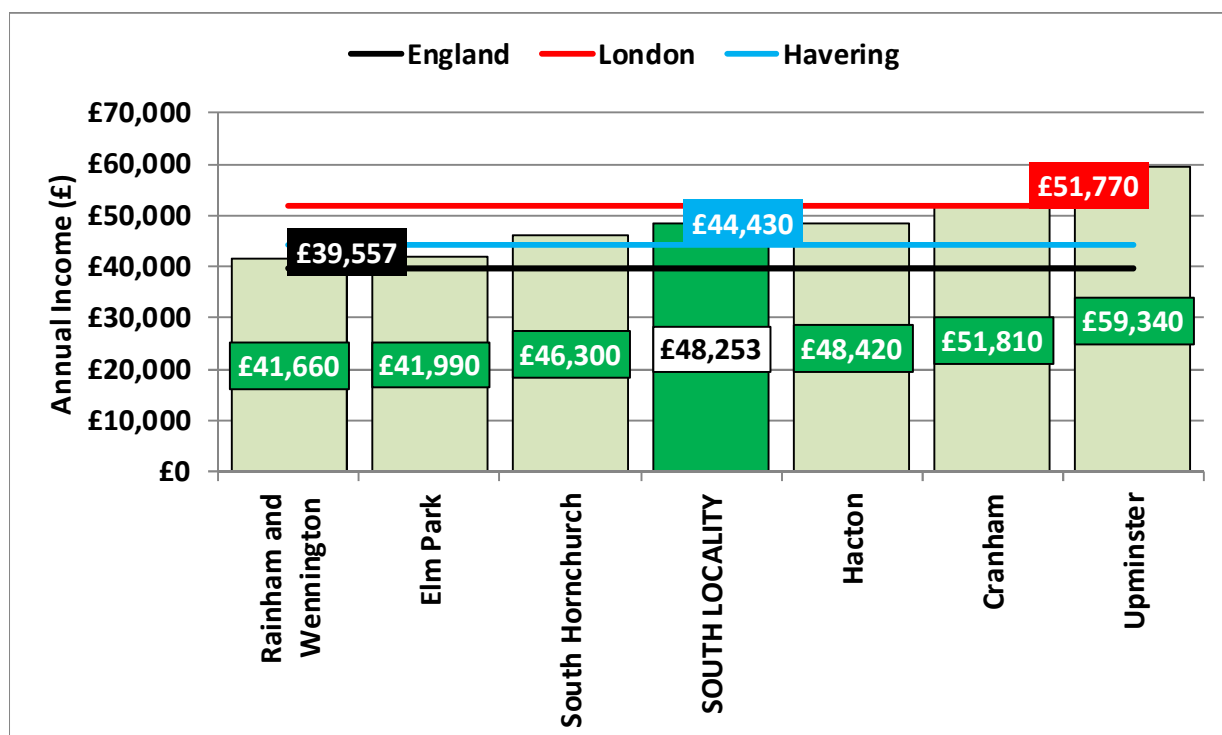

Data source: Census 2011; Office for National Statistics (ONS); Produced by Public Health Intelligence

5   Economic Profile

5.1   Income

The average gross household income in South Locality (£48,253), as measured in 2012/13, is low in comparison to the London average of £51,770 but higher than the Havering and England averages (£44,430 and 39,557 respectively). Upminster ward possessed the highest average gross household income, higher than London at £59,340 (Figure 19).

Figure 19: Total Average Annual Household Income, South Locality, Wards within South Locality, Havering, London and England


Data source: Household Income Estimates, Greater London Authority (GLA) 2012/13; Produced by Public Health Intelligence

5.2 Car Ownership

79.5% of households in South Locality have at least one car and this is slightly higher than both Havering (77%) and England (74.3%) but noticeably higher than London (58.3%).

Figure 20: Car or van ownership amongst households across wards within the South Havering Locality, London, England and Havering, 2011
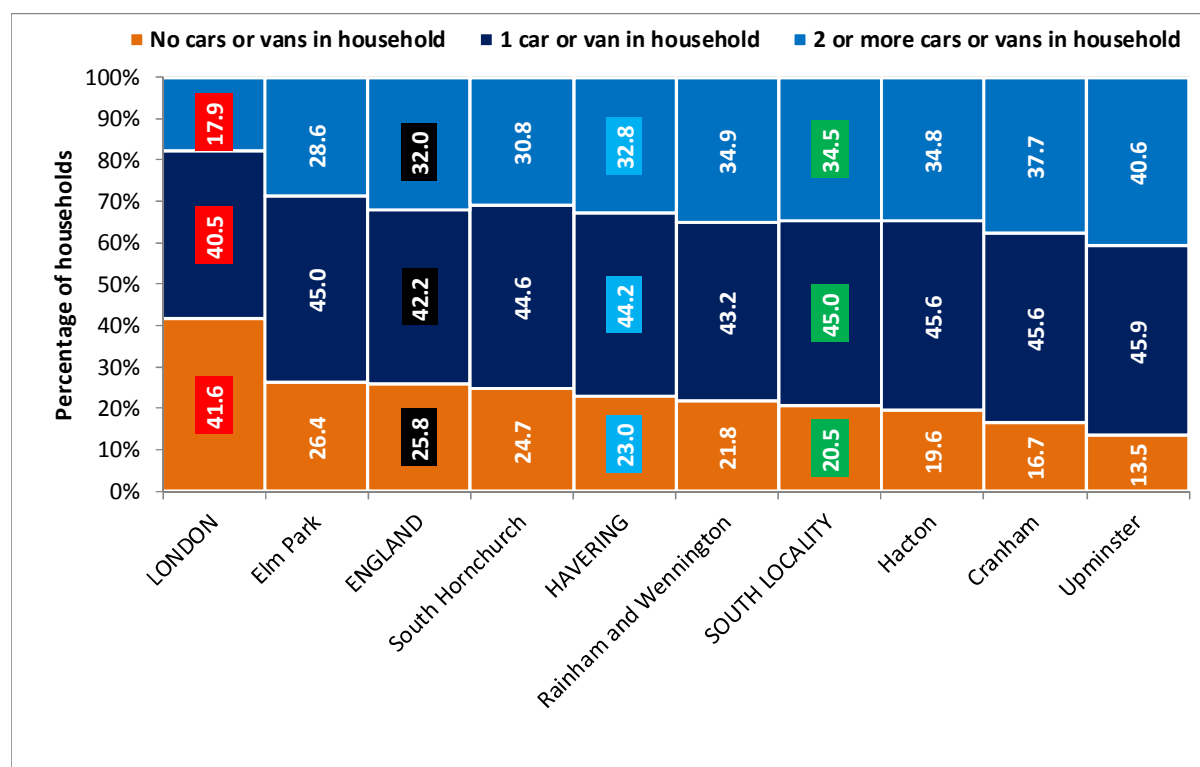

Data source: Census 2011; Office for National Statistics (ONS); Produced by Public Health Intelligence

5.3 Child Poverty

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.

Figure 21: Income deprivation affecting Children in South Locality, quintiles within Havering LSOA, 2015
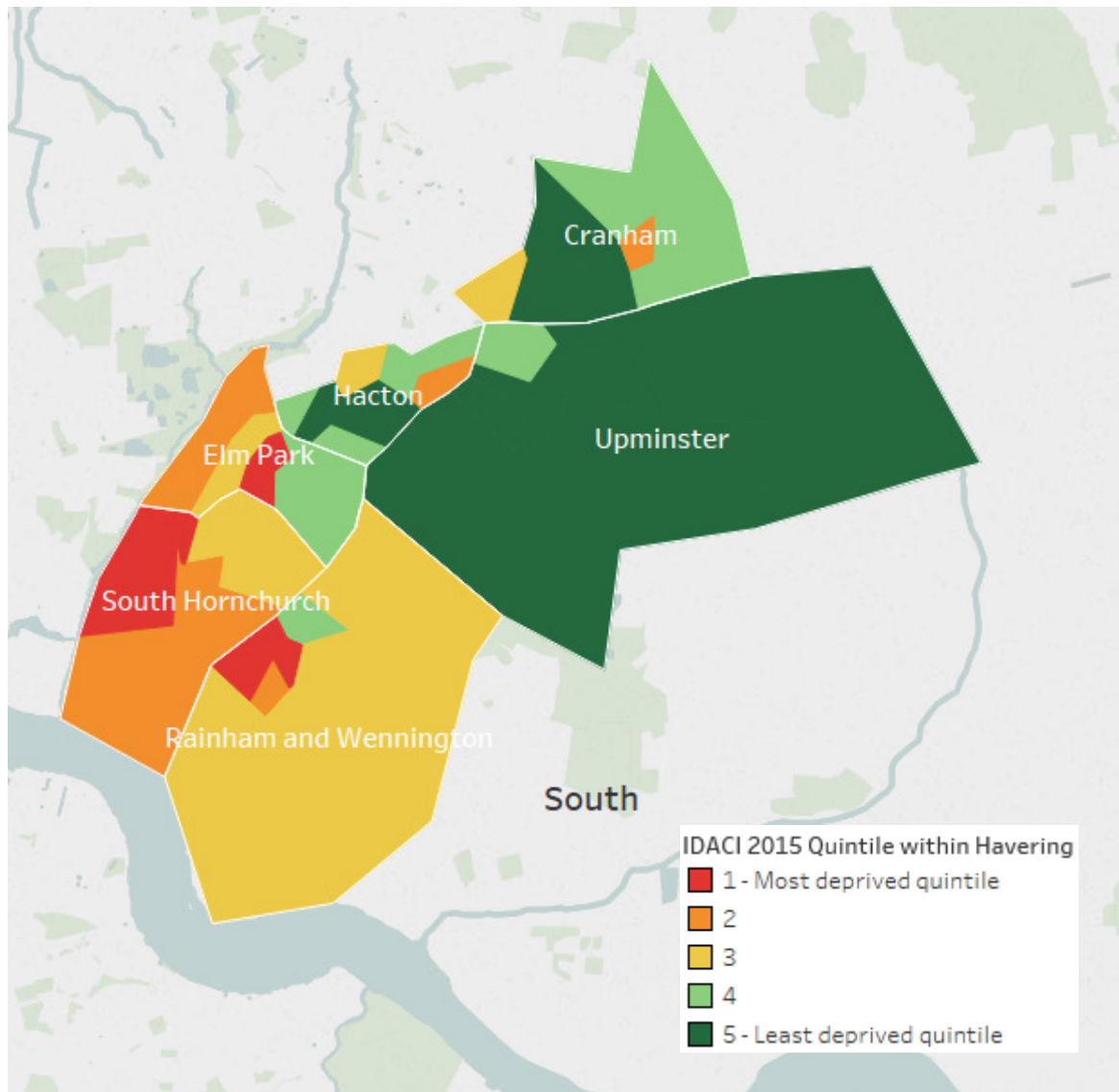
Data source: Indices of Multiple Deprivation, 2015 (IMD, 2015); Department for Communities and Local Government (DCLG), Produced by Public Health Intelligence

5.4 Highest Qualifications Held

The levels of education within the South Locality appears to be almost identical to that of Havering across all categories with the majority of residents having no qualifications (26%). Both London and England have a noticeably higher proportion of residents with a level 4 qualification (38% and 27% respectively) compared with South Locality (19%) Figure 22.

Figure 22: Proportion of residents by level of education, South Locality, Havering, London and England
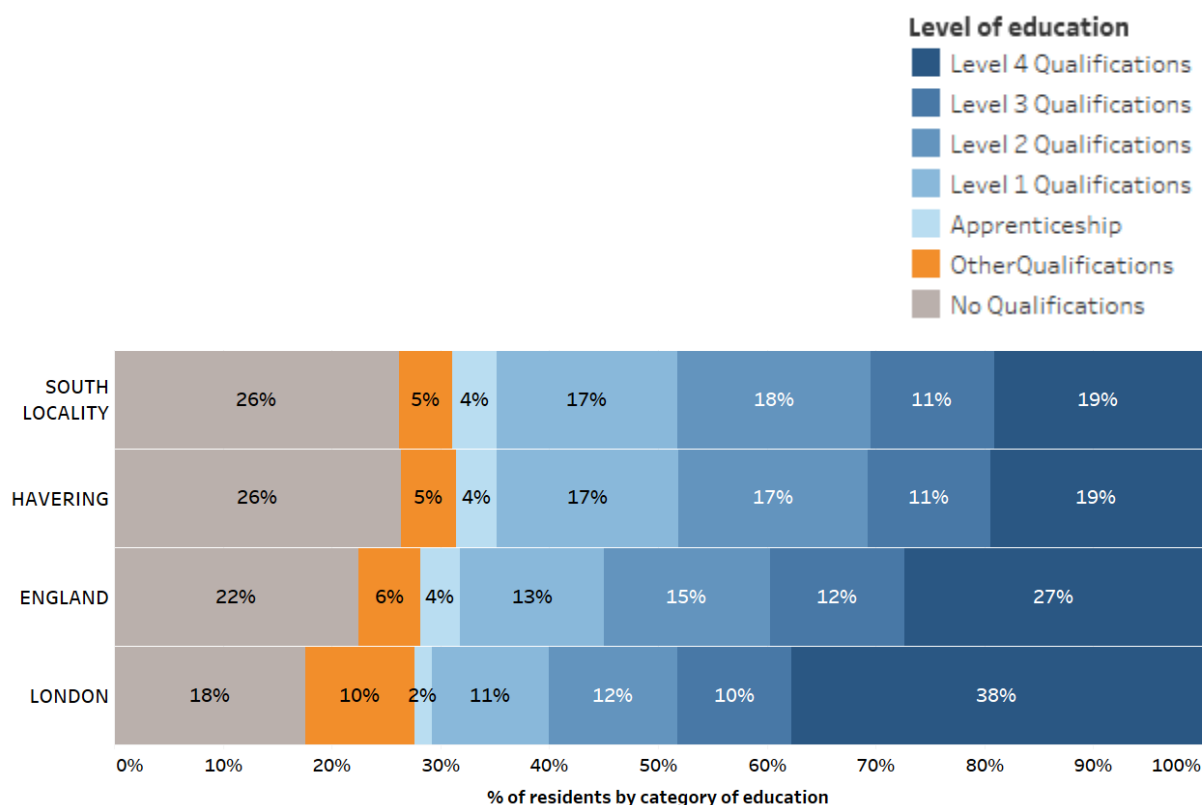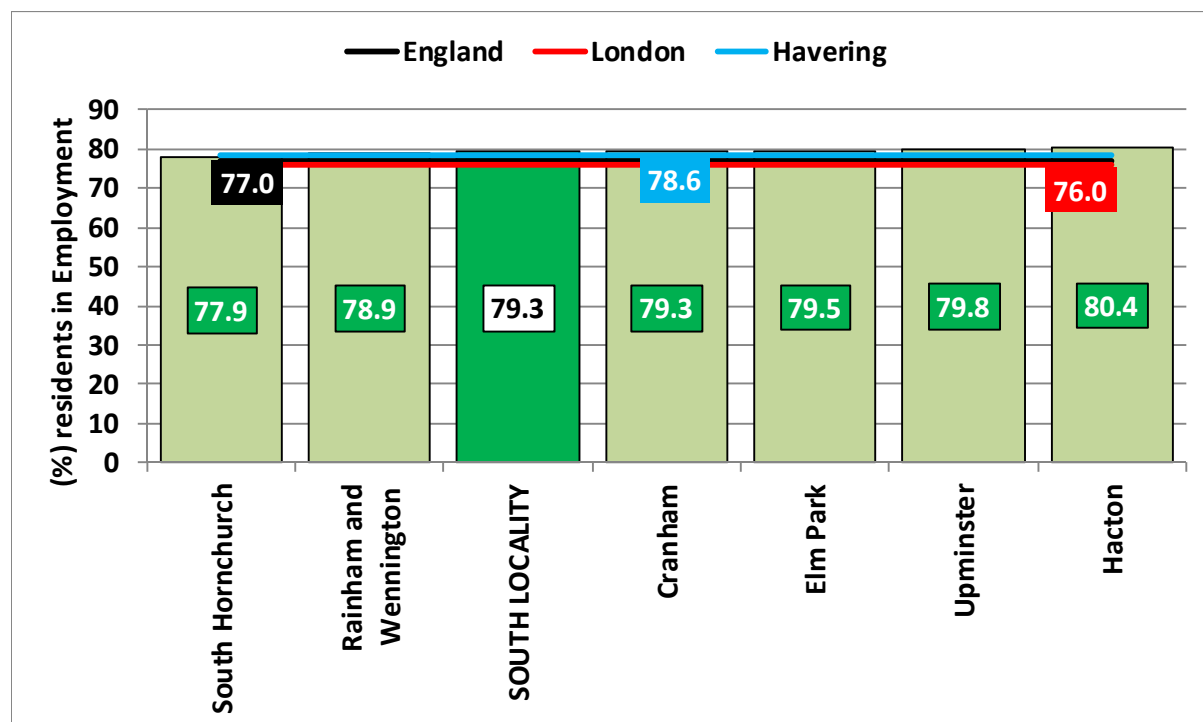

Source: Office of National Statistics Census 2011 (ONS 2011)

5.5 Employment and Unemployment

79.3% of residents within South locality were employed as at the 2011 Census and this was higher than Havering (78.6%), London (76%) and England (77%). Hacton Ward had the highest proportion of residents in employment (80.4%) whilst South Hornchurch had the lowest (77.9%) as shown in Figure 23.

Figure 23: Proportion of residents aged 16 - 64 in employment, South Locality, Wards within South Locality, Havering, London and England, 2011.

Source: Office of National Statistics Census 2011 (ONS 2011)

Figure 24: Proportion of economically active population claiming Job Seekers Allowance, South Locality, Wards within North Locality, Havering, London, England as of December 2015
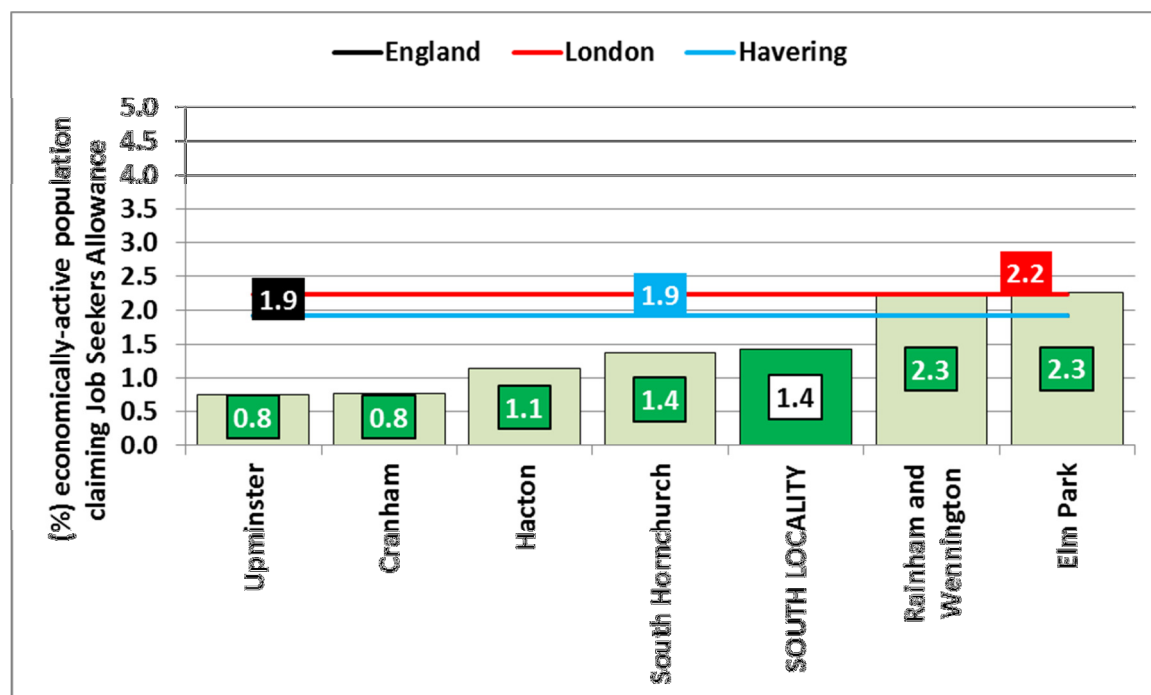
Data source: Greater London Authority (GLA) Claimant Model

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%). Upminster Ward had the lowest proportion of residents claiming job seekers allowance (0.8%) whilst Elm Park and Rainham and Wennington had the highest (2.3%) as shown in Figure 24.

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6 Risk Factors for Ill Health

6.1 Obesity

The majority of the CCG registered population within the South Locality are either at a healthy weight (32.2%) or overweight (31.7%). At the extreme ends of the scale, both underweight and Obesity III are represented by 2.7% of the registered population (Figure 40).

Figure 25: Proportion of Havering CC registered population within each BMI weight category in the South locality (as of December 2016)

Source: Health Analytics (accessed December 2016)

In 2012/13-2014/15, a quarter of children in South Locality (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.

6.2 Healthy Eating

Information and recent data are not immediately available at locality level (or smaller geographical level); this section will be updated when data becomes available.
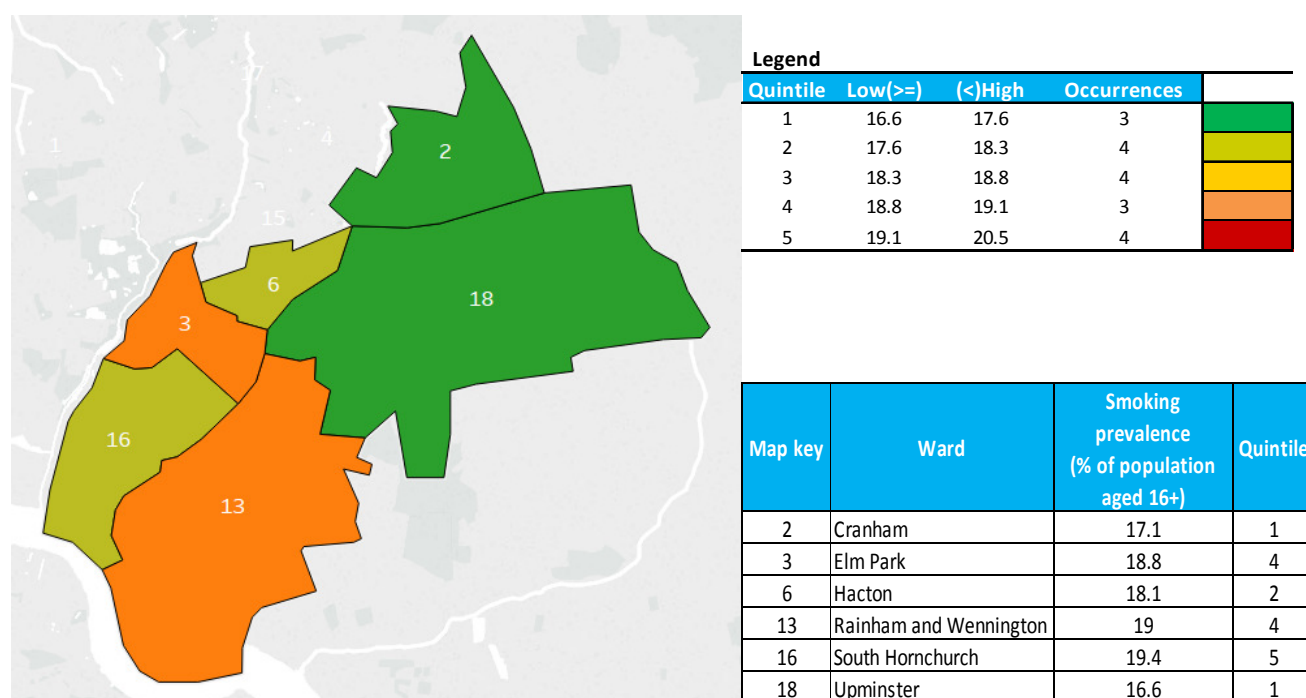
6.3 Physical Activity

Information and recent data are not immediately available at locality level (or smaller geographical level); this section will be updated when data becomes available.

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 Physical activity is generally expected to be lower in more deprived areas around the locality.

6.4 Smoking

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 in 2015 – see Figure 26.

Figure 26: Smoking Prevalence (% of adult population) across South Locality Wards by Quintile[12] (where Quintiles 1 and 5 refer to the lowest and highest prevalence wards respectively)

Legend

Quintile	Low(>=)	(<)High	Occurrences	
1	16.6	17.6	3	
2	17.6	18.3	4	
3	18.3	18.8	4	
4	18.8	19.1	3	
5	19.1	20.5	4	

Map key	Ward	Smoking prevalence (% of population aged 16+)	Quintile
2	Cranham	17.1	1
3	Elm Park	18.8	4
6	Hacton	18.1	2
13	Rainham and Wennington	19	4
16	South Hornchurch	19.4	5
18	Upminster	16.6	1

Data source: Action on Smoking and Health (ASH) Ready Reckoner Tool (published December 2015); Produced by Public Health Intelligence

Smoking status at time of delivery, 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; Smoking during pregnancy is expected to be a greater issue among the more deprived areas within the Locality.

6.5 Alcohol Misuse

Information and recent data are not immediately available at locality level (or smaller geographical level); this section will be updated when data becomes available.

The majority of drinkers (73%) in Havering do not drink above the recommended limits[13]. 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

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[12] Quintile is a statistical term to divide a sample or population into fifths
[13] Alcohol Harm Map by Alcohol Concern accessed Jan 2016

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England in 2014/15[14] , alcohol is implicated in 4% of ambulance call outs; 16% of road fatalities and over 70% of cases of domestic violence[15]. Alcohol related issues are generally expected to be more pronounced in more deprived areas within the Locality.

6.6 Teenage Pregnancy

Conception data for age <18 years is available at ward level, but this is not allowed to be published in a public document in its current form. Some figures may be allowed to be published with the pooling of a larger number of years of data; we will do the analysis and seek permission from National Statistics for publication.

6.7 Breastfeeding

Information and recent data are not immediately available at locality level (or smaller geographical level); this section will be updated when data becomes available.

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[14] *Indicator 10.01: Admission episodes for alcohol-related conditions (Narrow) Local Alcohol Profile for England (accessed December 2015), Public Health England*

[15] *Gilchrist, E., Johnson, R., Takriti, R., Weston, S., Beech, A. and Kebbell, M. (2003) Domestic violence offenders: characteristics and offending related needs, Findings, 217, London, Home Office*

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7 Current Status of Health

7.1 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 the digestive system. Unspecified dementia comprises the biggest single underlying cause of death. Lung cancers comprise the largest proportion of deaths from Cancer.

Figure 27: Distribution of number of deaths amongst residents of South Locality of all ages by broad underlying causes (with four biggest broken down further), in 2012-16
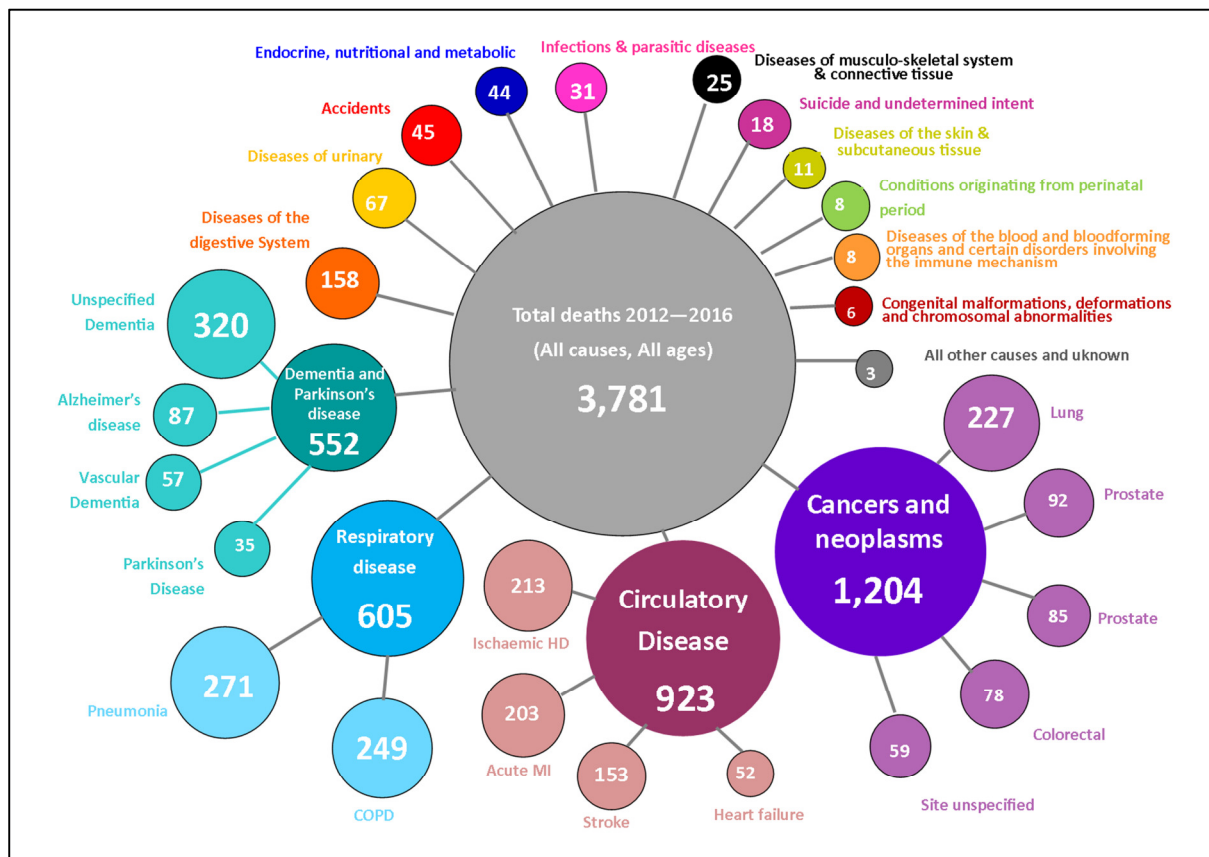
Data source: Primary Care Mortality Database (Office for National Statistics); Produced by Public Health Intelligence

In North Locality, about 200 deaths (26%) each year[16] 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 (Figure 28). This reflects the national picture.

Figure 28: Distribution of number of deaths amongst residents of South Locality of those aged under 75 by broad underlying causes (with four biggest broken down further), in 2012-16
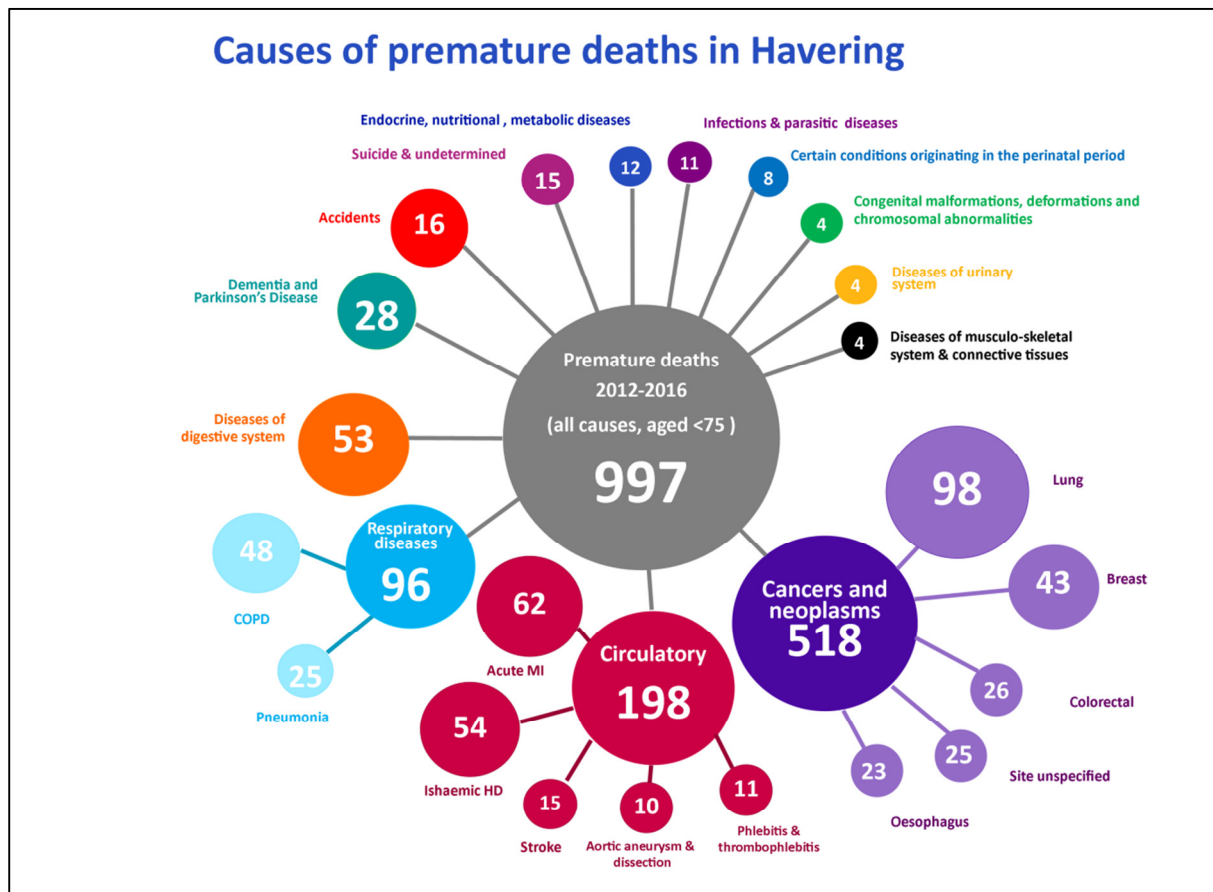

Data source: Primary Care Mortality Database (Office for National Statistics); Produced by Public Health Intelligence

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

7.2 Long-term Conditions

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.

Figure 29: Ratio of patients with long-term conditions (LTCs) compared with patients with no long-term conditions (LTCs) for A&E attendances, Emergency Admissions and Inpatient Bed Days in South Locality
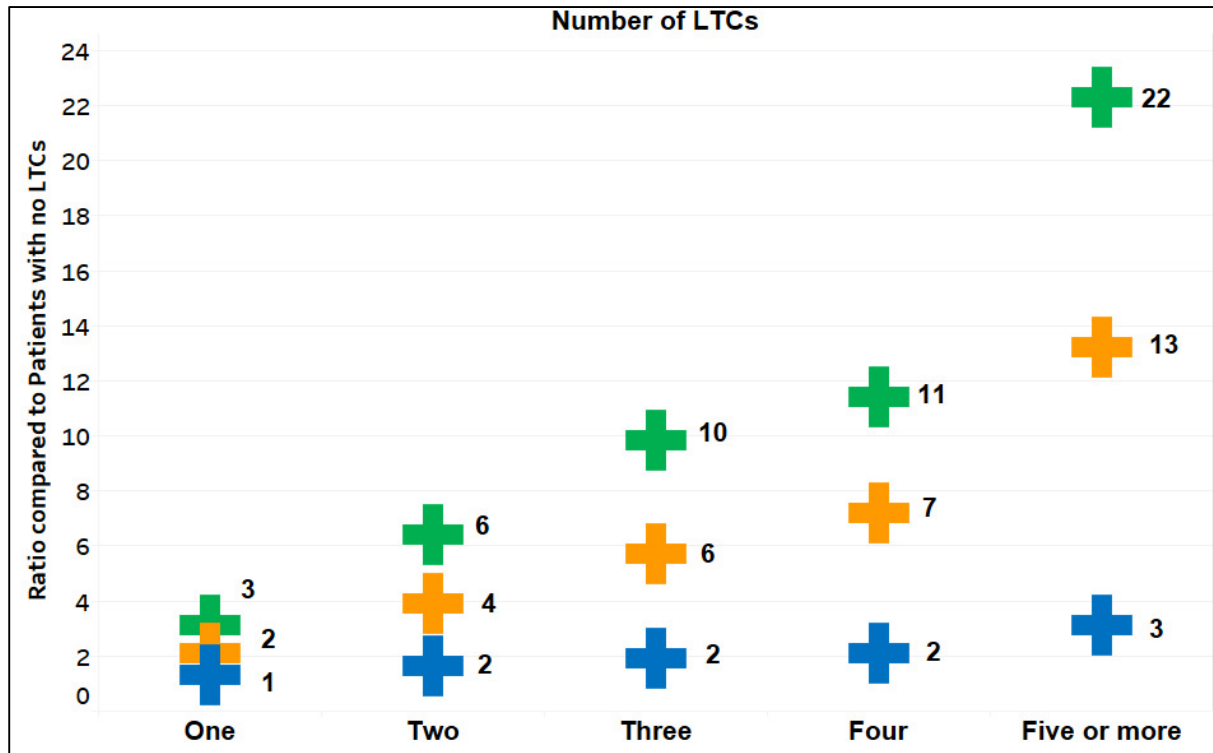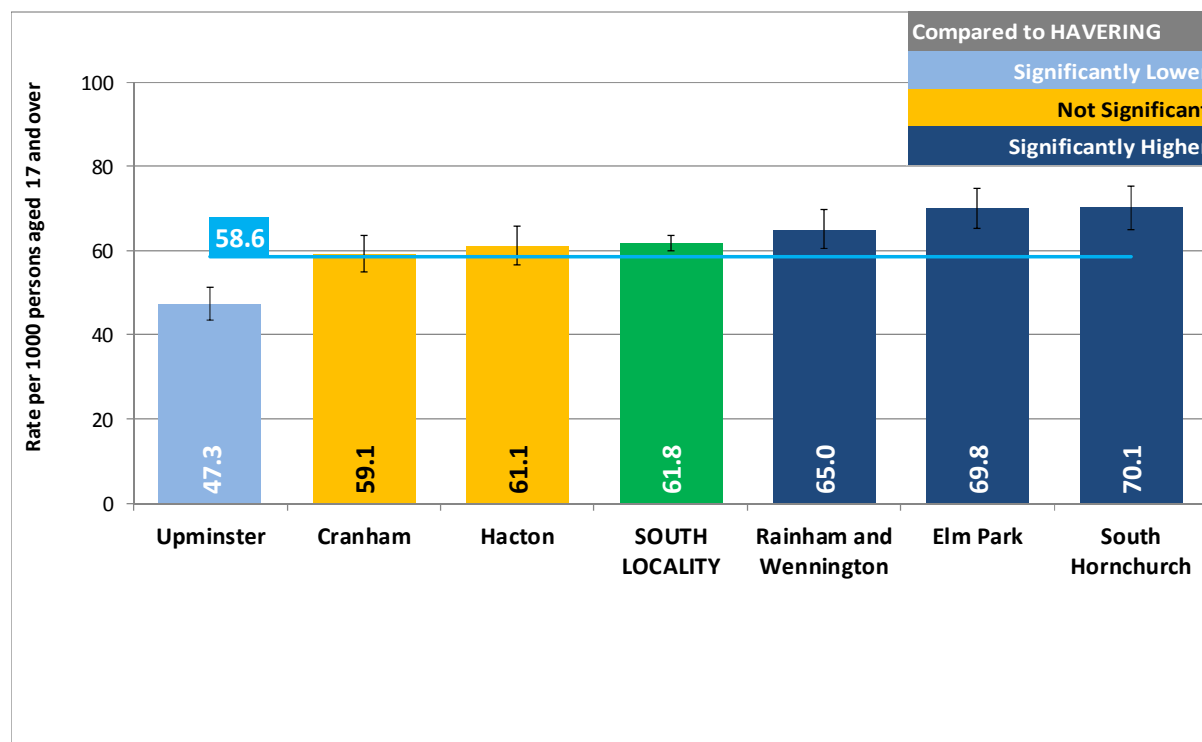

Data source: Health Analytics; Produced by Public Health Intelligence

7.2.1 Diabetes

The prevalence of Diabetes appears to be statistically higher in the South Locality (61.8 per 1,000 persons) compared with the Havering average (58.6 per 1,000 persons); Upminster Ward (the most affluent) has the lowest prevalence of Diabetes (47.3 per 1,000) which is statistically lower than Havering; South Hornchurch has the highest prevalence of Diabetes (70.1 per 1,000) which is statistically higher than the Havering average.

Figure 30: Prevalence of diabetes in patients registered with GP in South Locality Wards compared with Havering CCG per 1,000 persons aged 17 and over, as of February 2017
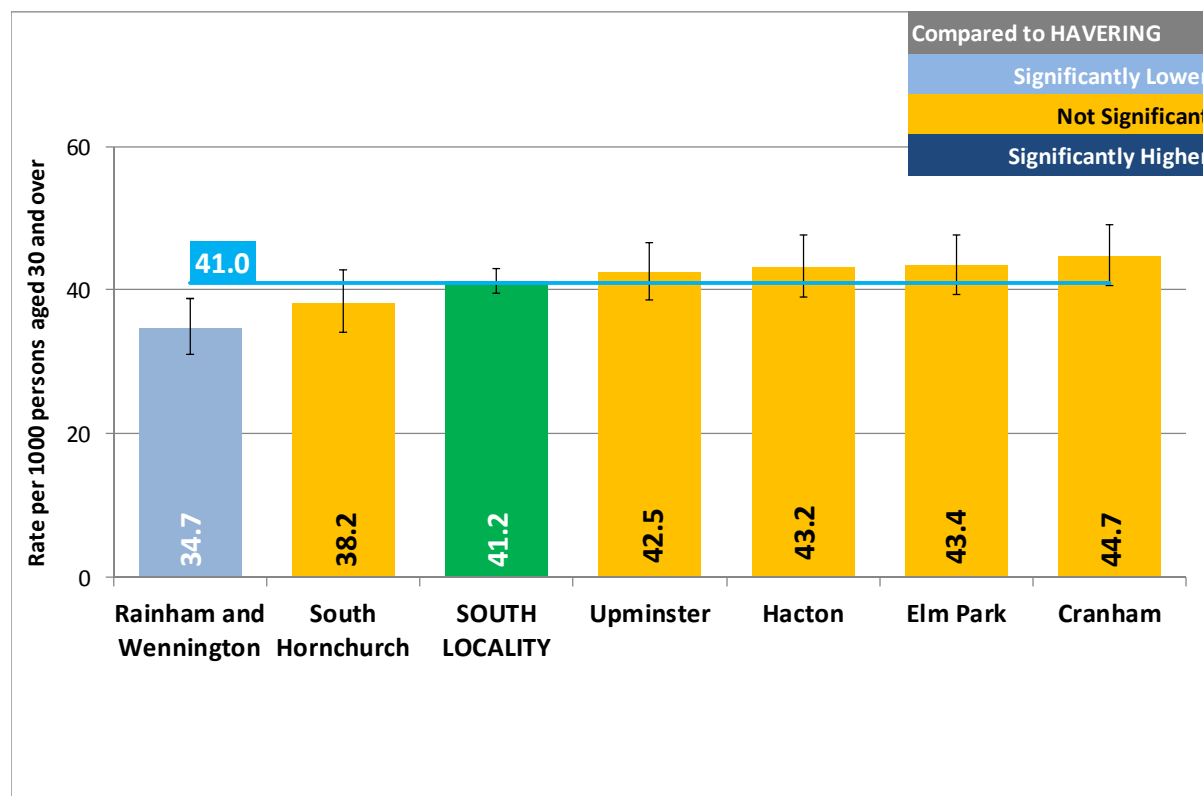

Data source: Health Analytics (accessed February 2017); Produced by Public Health Intelligence

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7.2.2 Coronary Heart Disease

The prevalence of Coronary Heart Disease appears to be statistically similar in the South Locality (41.2 per 1,000 persons) compared with the Havering average (41.0 per 1,000 persons); Rainham and Wennington has the lowest prevalence of CHD (34.7 per 1,000) statistical lower than the Havering Average; Cranham ward has the highest prevalence of CHD (44.7 per 1,000) but similar to Havering.

Figure 31: Prevalence of Coronary Heart Disease in patients registered with GP in South Locality Wards compared with Havering CCG per 1,000 persons aged 30 and over, Census wards, as of February 2017
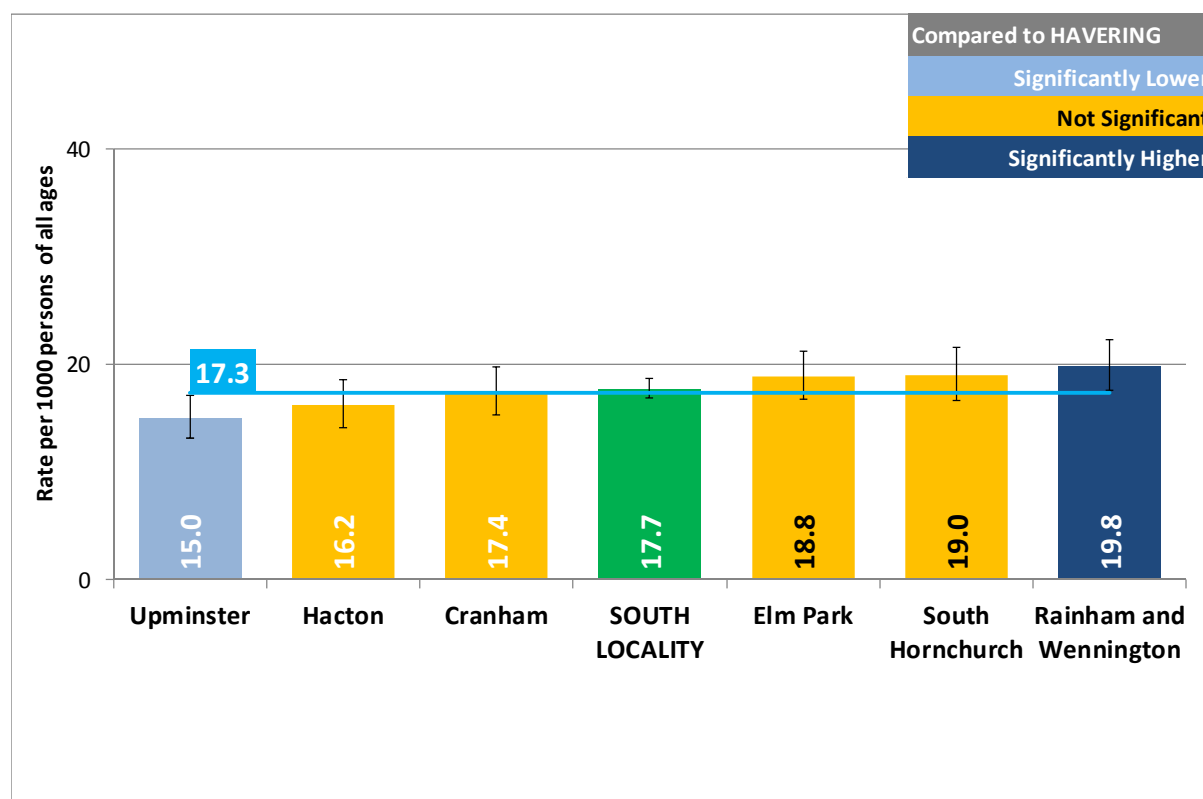

Data source: Health Analytics (accessed February 2017); Produced by Public Health Intelligence

7.2.3 Chronic Obstructive Pulmonary Disease

The prevalence of Chronic Obstructive Pulmonary Disease (COPD) appears to be statistically similar in the South Locality (17.7 per 1,000 persons) compared with the Havering average (17.3 per 1,000 persons); Pettits Ward has the lowest prevalence of COPD (14.7 per 1,000); Rainham and Wennington ward has the highest prevalence (19.8 per 1,000) but statistically similar to Havering.

Figure 32: Prevalence of Chronic Obstructive Pulmonary disease in patients registered with GP in South Locality Wards compared with Havering CCG per 1,000 persons of all ages, Census wards, as of February 2017
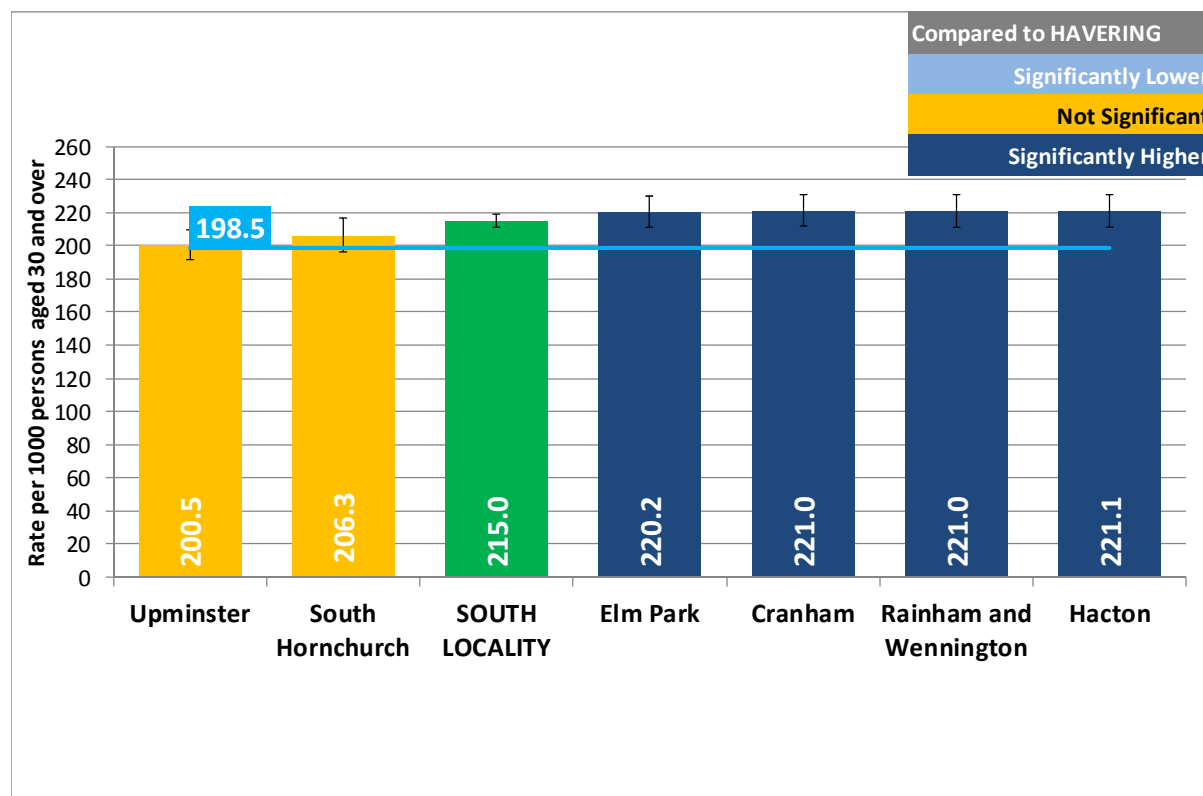

Data source: Health Analytics (accessed February 2017); Produced by Public Health Intelligence

7.2.4 Hypertension

The prevalence of Hypertension appears to be statistically higher in the South Locality (215.0 per 1,000 persons) compared with the Havering average (198.5 per 1,000 persons); Upminster (most affluent ward) has the lowest prevalence of Hypertension (200.5 per 1,000), similar to Havering; Hacton ward has the highest prevalence (221.1 per 1,000) which is statistically higher than Havering.

Figure 33: Prevalence of Hypertension in patients registered with GP in South Locality Wards compared with Havering CCG per 1,000 persons aged 30 and over, Census wards, as of February 2017
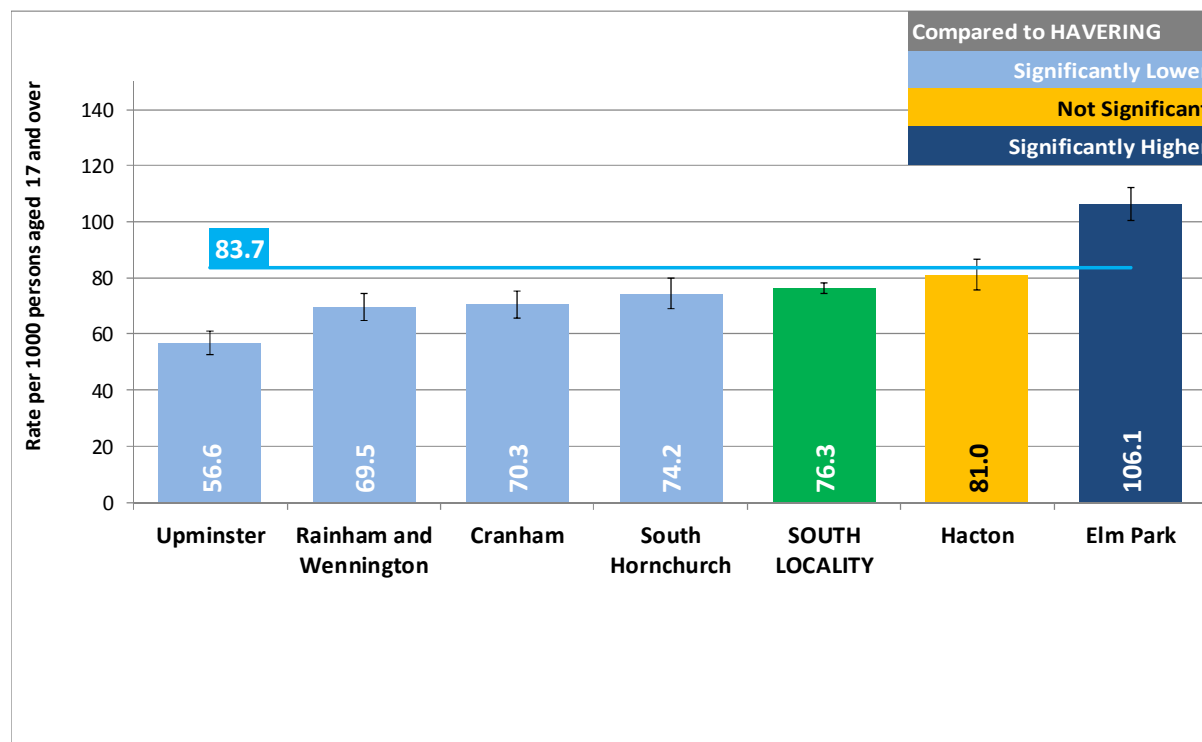

Data source: Health Analytics (accessed February 2017); Produced by Public Health Intelligence

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7.2.5 Mental Illness

The prevalence of Depression appears to be statistically lower in the South Locality (76.3 per 1,000 persons) compared with the Havering average (83.7 per 1,000 persons); Upminster (most affluent ward) has the lowest prevalence of Depression (56.6 per 1,000); Elm Park has the highest prevalence (106.1 per 1,000), statistically higher than Havering.

Figure 34: Prevalence of Depression in patients registered with GP in South Locality Wards compared with Havering CCG per 1,000 persons aged 17 and over, as of February 2017
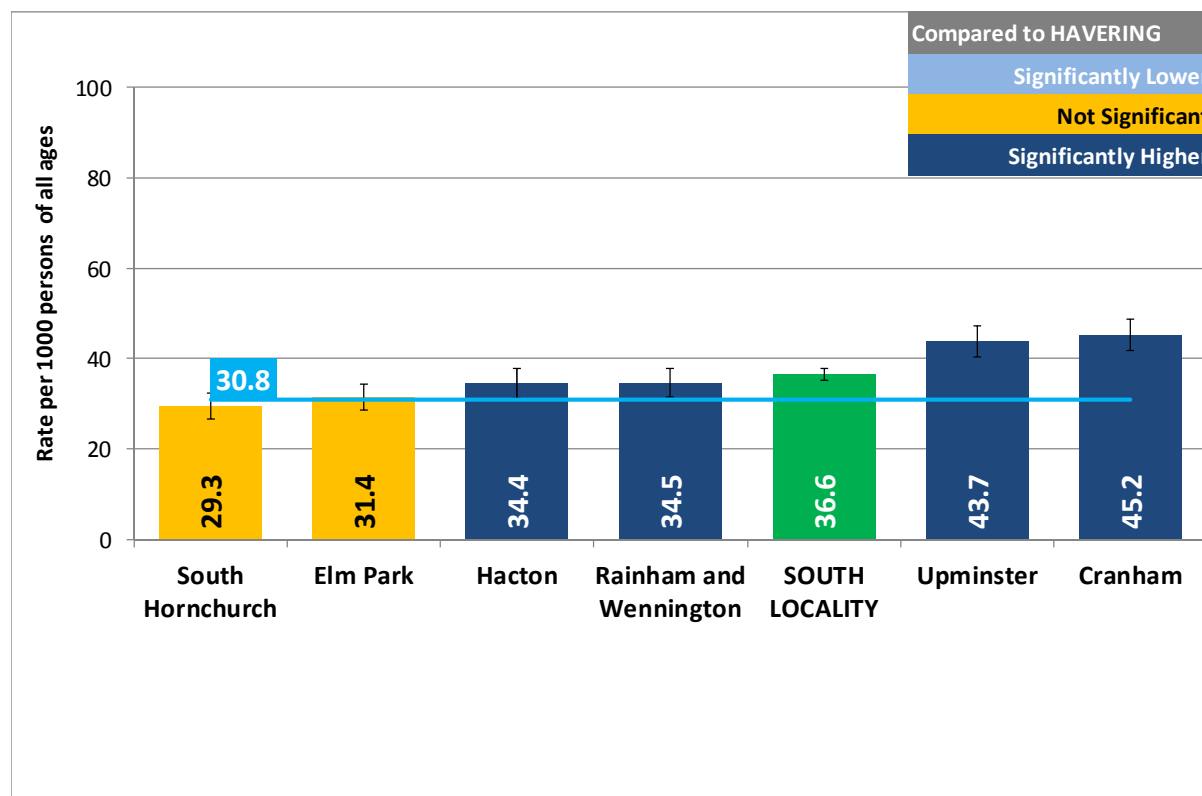

Data source: Health Analytics (accessed February 2017); Produced by Public Health Intelligence

7.2.6 Cancer

The prevalence of Cancer appears to be statistically higher in the South Locality (36.6 per 1,000 persons) compared with the Havering average (30.8 per 1,000 persons); South Hornchurch has the lowest prevalence of Cancer (29.3 per 1,000), similar to Havering; Cranham has the highest prevalence (45.2 per 1,000) which is noticeably higher than Havering.

Figure 35: Prevalence of Cancer in patients registered with GP in South Locality Wards compared with Havering CCG per 1,000 persons of all ages, Census wards, as of February 2017


Data source: Health Analytics (accessed February 2017); Produced by Public Health Intelligence

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8 Service Use

8.1 Hospital Admissions

In 2015/16, there were 13,669 elective and 6,640 emergency hospital admissions (spells) for Havering CCG-registered patients[17] within a South Locality Practice. The top 10 causes of admissions of elective and emergency admissions are displayed in Figure 36. Only the top 5 causes of Elective Admissions and Emergency Admissions account for 69% and 68% respectively.

Figure 36: Top 10 causes of admissions, by primary ICD-10 chapter, Havering CCG registered population, 2015/16
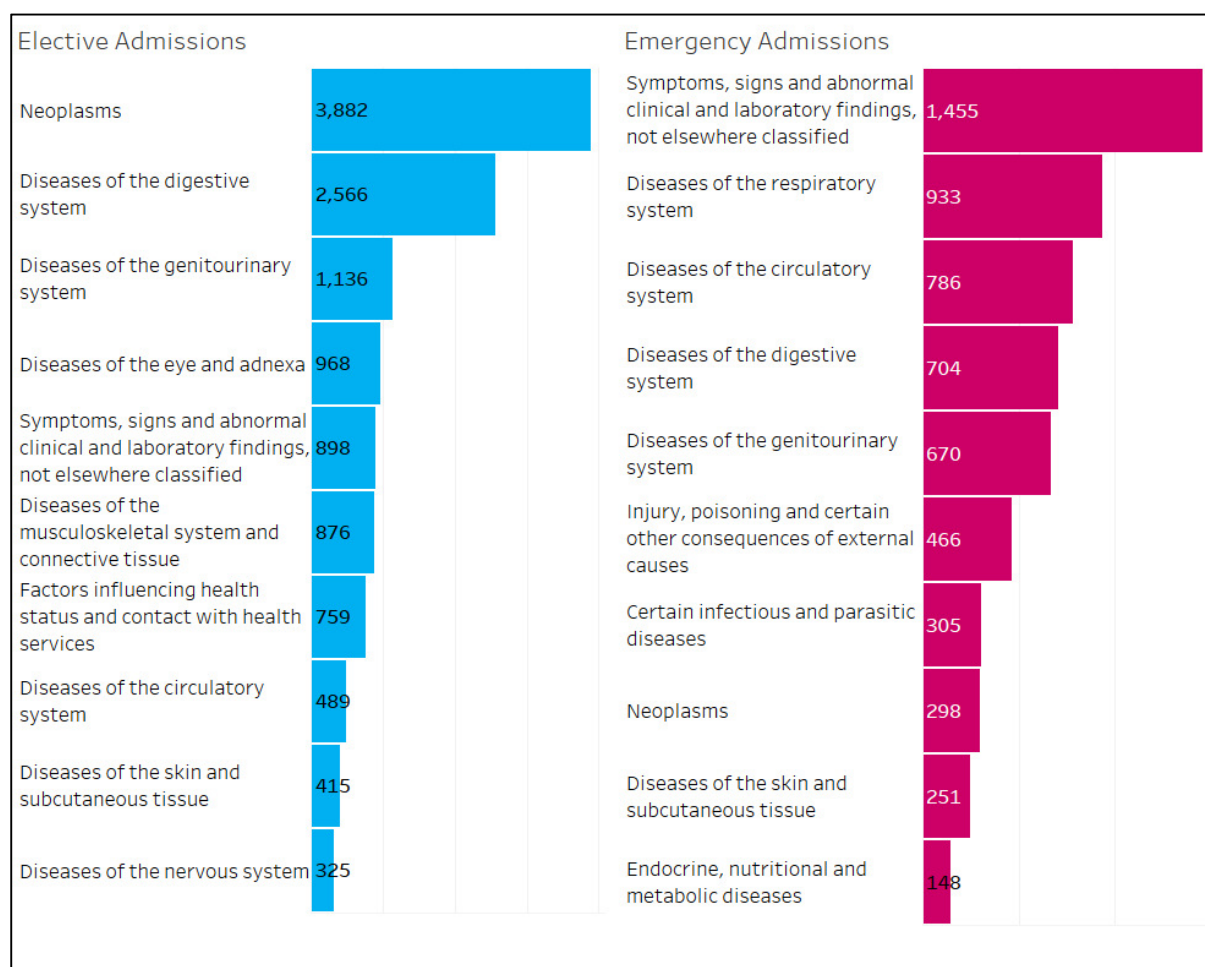
Data source: Secondary Uses Services (SUS)

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[17] *Secondary Uses Services (SUS)*

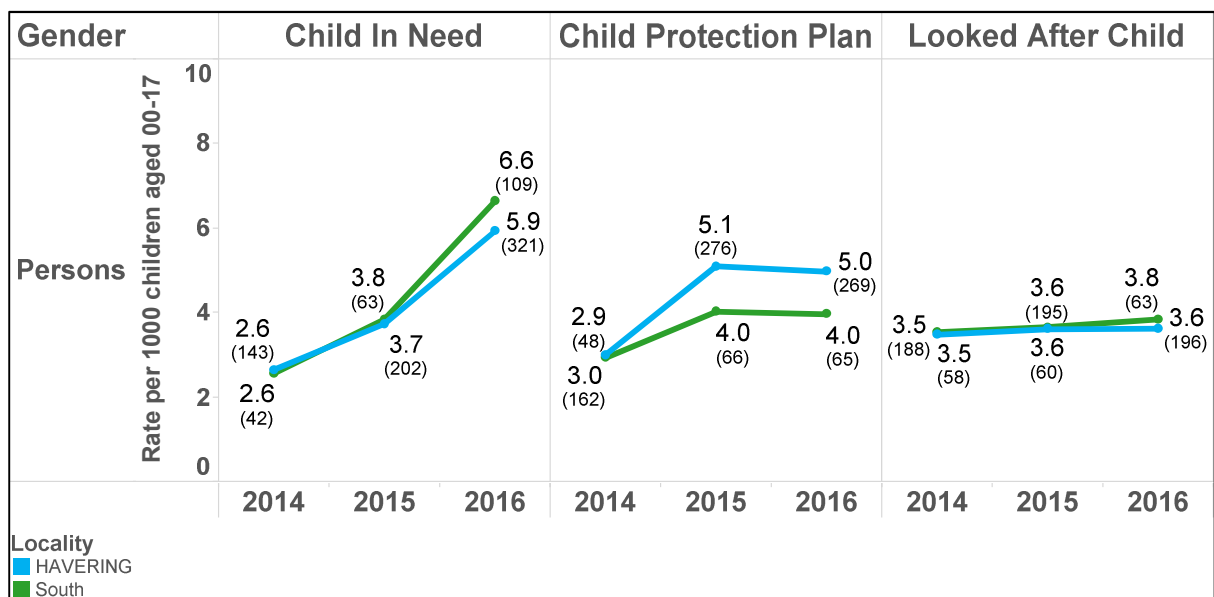## 8.2 Children's Social Care

8.2.1 Children's Centres

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.

Figure 37: Rate of children's social care activity by type of plan per 1,000 children aged under 18 years, South Locality and Havering 2014-2016
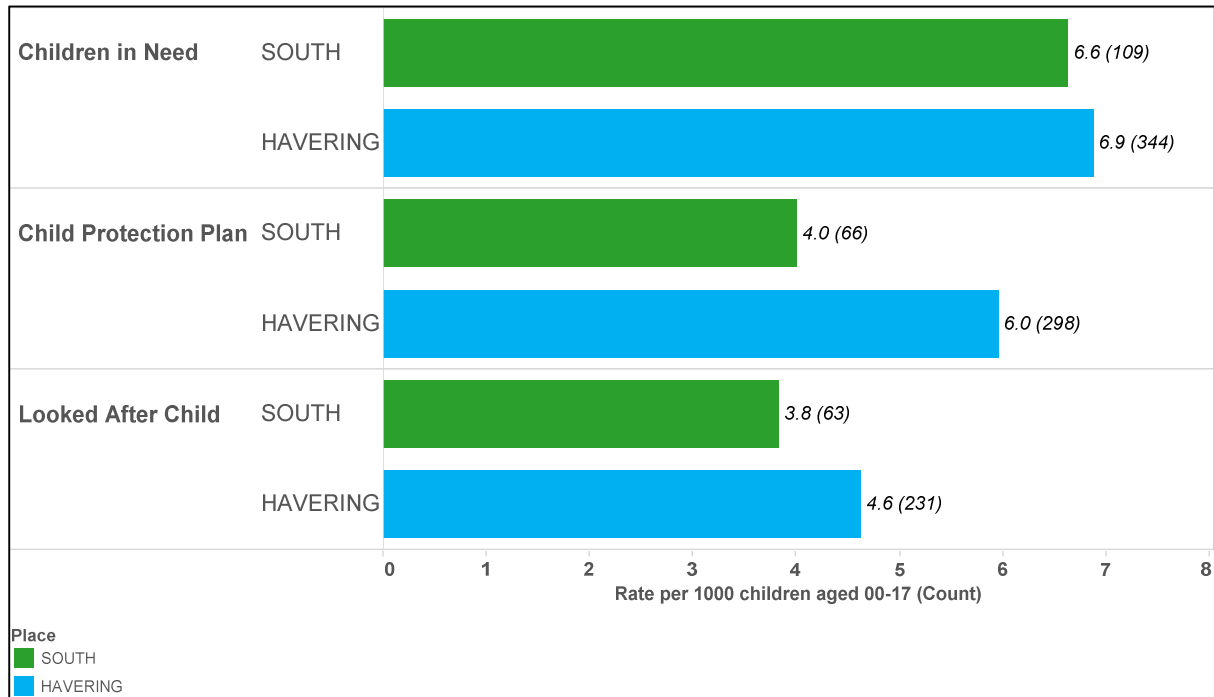
Data source: Children's Social Care Case Management System; Produced by Public Health Intelligence

Figure 38: Rate of children's social care activity by type of plan and Gender per 1,000 children aged under 18 years, South Locality and Havering 2014 to 2016
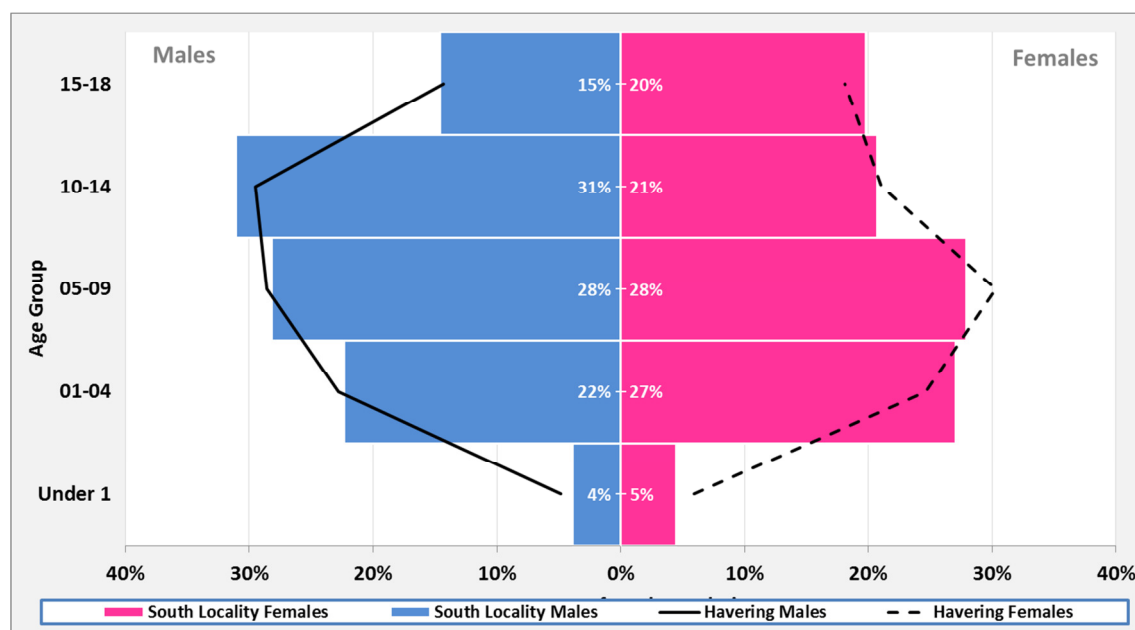

Data source: Children's Social Care Case Management System; Produced by Public Health Intelligence

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Table 6: Count of children in need activity, South Locality, 2014-2016

AGEBAND	GENDER	
	M	F
Total	103	111
Under 1	4	5
01-04	23	30
05-09	29	31
10-14	32	23
15-18	15	22

Figure 39: Population Pyramid of children in need activity, South locality and Havering, 2014-2016

Data source: Children's Social Care Case Management System; Produced by Public Health Intelligence

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%).

8.3 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.

8.4 Primary Health Care

8.4.1 Map of Health Estates
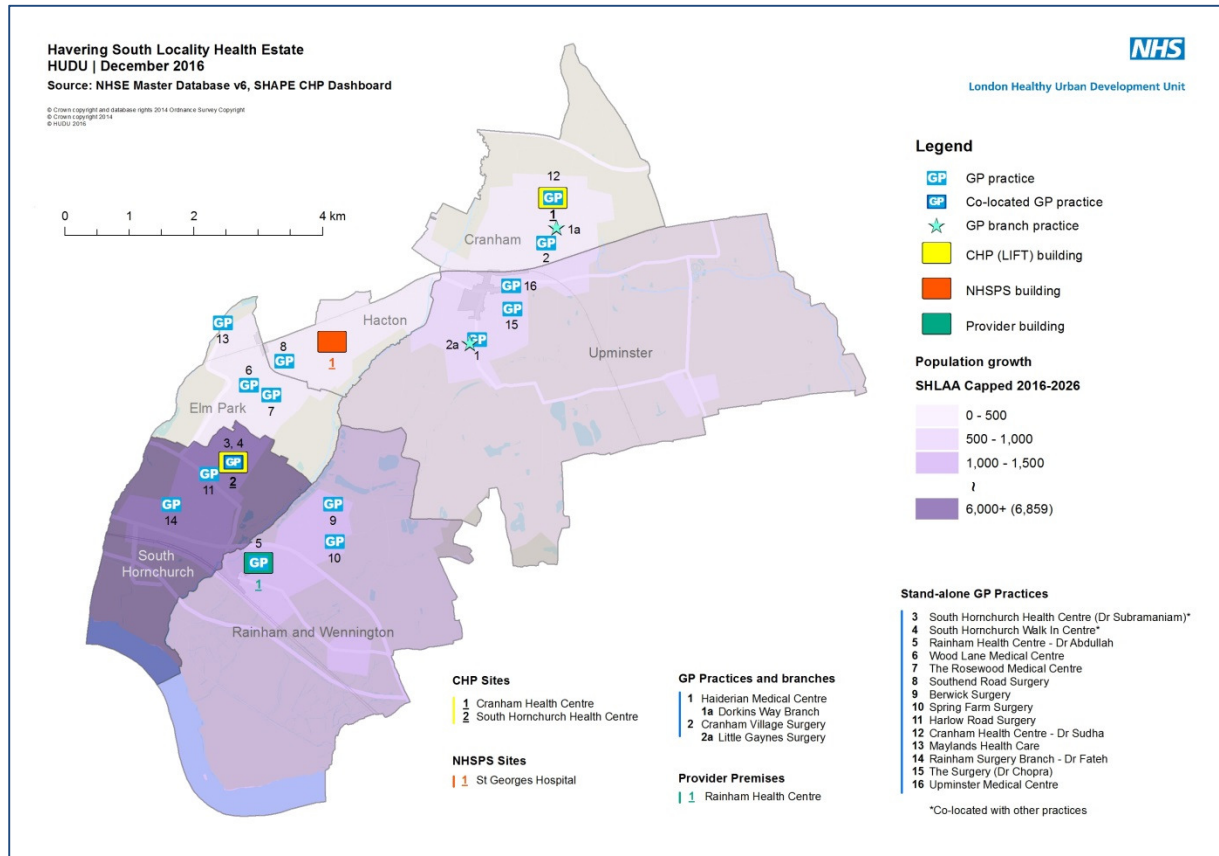
8.4.2 Health Services

The majority of practices within the South locality appear to possess residents within the same locality. F82008 appears to be the only anomaly with 61% of its registered population coming from the South locality.

Figure 40: Proportion of GP practice population by locality of residence within the South Havering locality
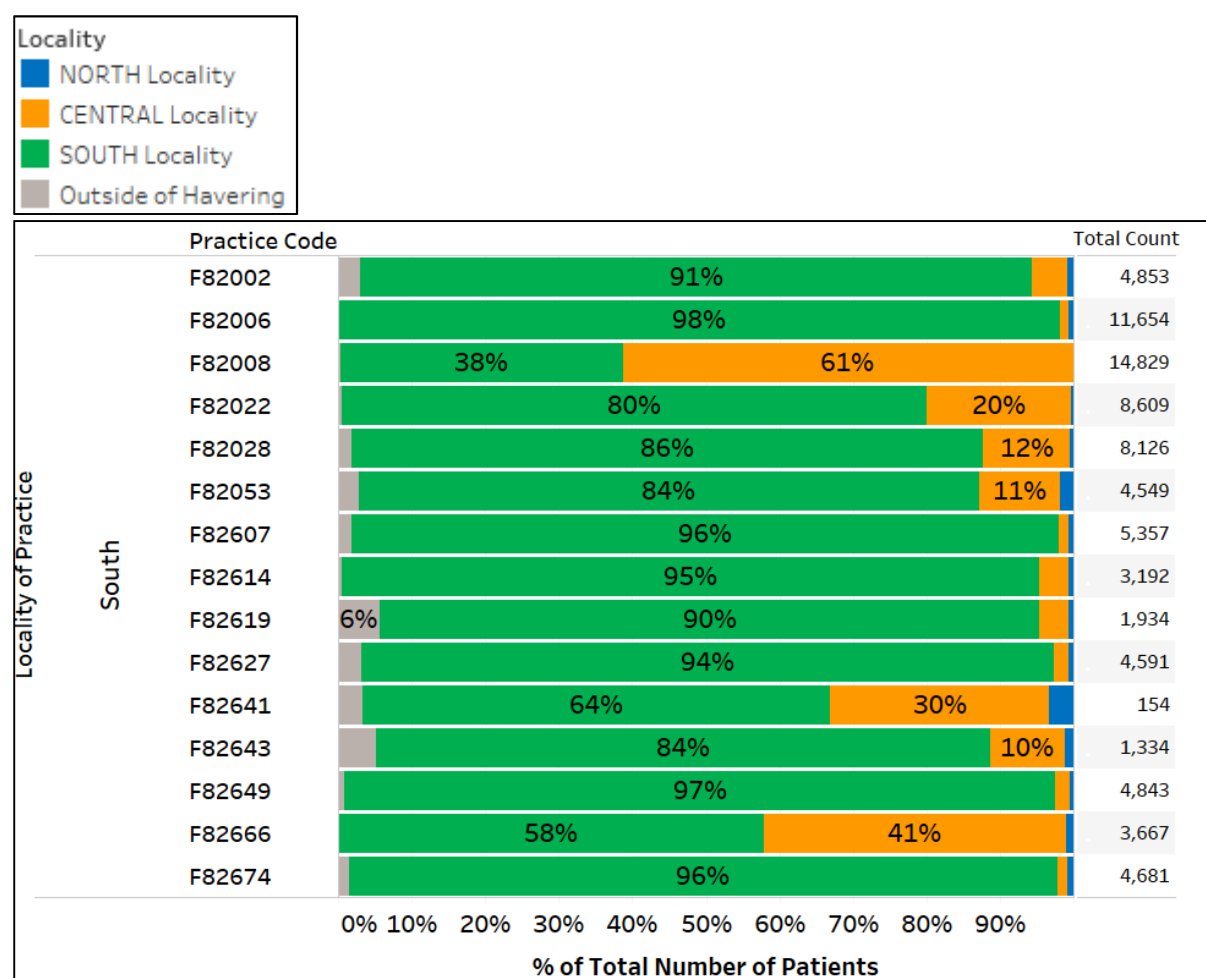
Source: Health Analytics, December 2016

Primary Care

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 (2,073 patients per GP-FTE) but lower than London average (6825 patients per GP-FTE) and the England average (5252 patients per GP-FTE) (Figure 41).

The workload per GP will vary not only because of the number of registered patients but also the level of ill health amongst registered patients. GPs based in areas with higher levels of deprivation are also more likely to have increased demand for services.

Figure 41: Number of registered patients per GP, Havering Clinical Commissioning Group (HCCG) GP practices, Havering CCG, London average, England Average 2016
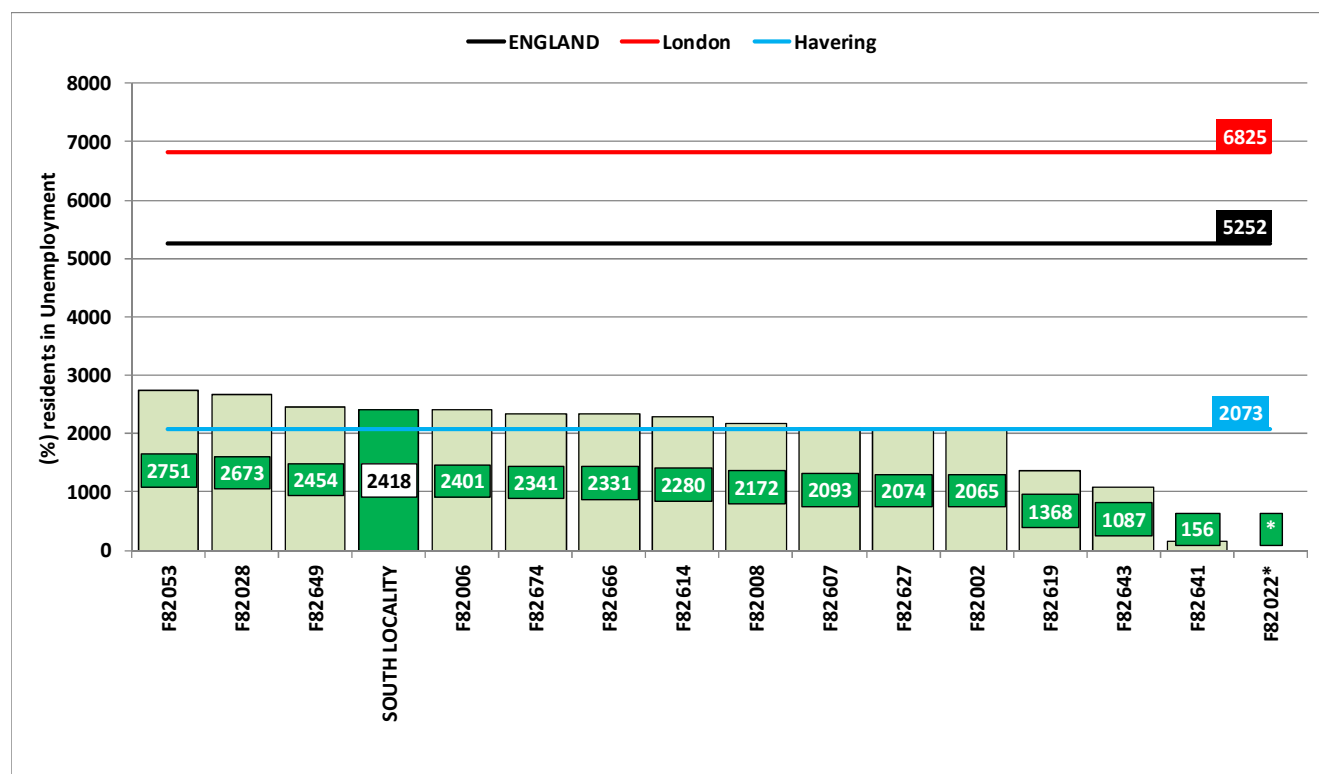
Data source: NHS Digital (Numerator: number of patients registered at a GP Practice as at December 2016; and denominator: number of GPs (FTE) linked to a GP practice as at January 2017); Produced by Public Health Intelligence