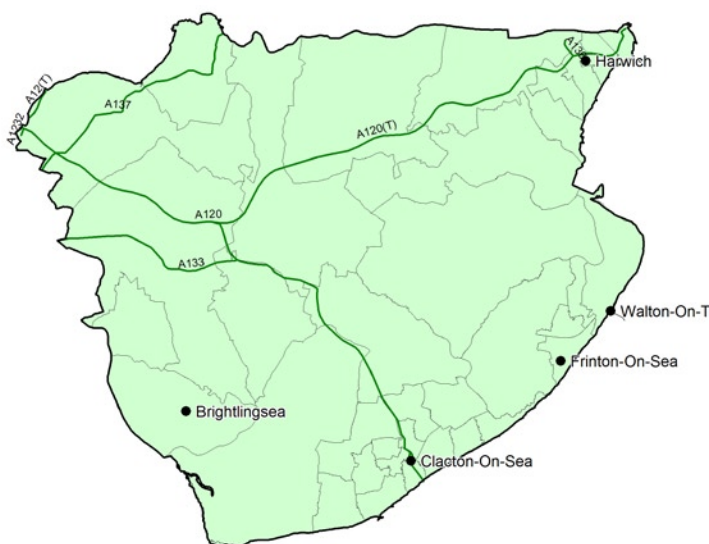


Health Profile for Tendring 2006

Introduction



Local authority health profiles are designed to show the health of people in each local authority area, and include comparisons with other similar populations. They are produced by Public Health Observatories and will be updated annually. With other local information¹ these profiles demonstrate where action can be taken to improve people's health and reduce health inequalities.

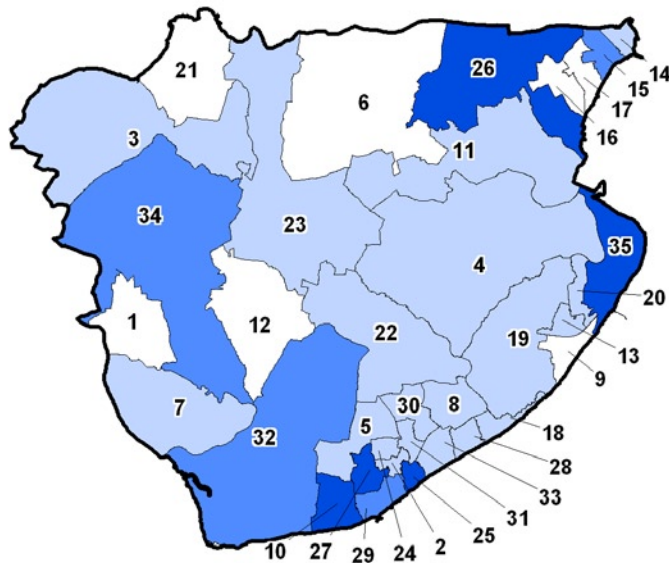
¹e.g. Community Plans, Director of Public Health Annual Reports, Local Area Agreements.

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Key points

- Tendring is a rural area of 142,000 people in coastal Essex. Over the last 20 years the population has grown by over a fifth (high for the East of England). This growth is expected to continue. The area has the highest proportion of older people in the East of England: almost 1 in 3 are pensioners. Ethnic minority groups are small at 3%.
- 1 in 7 people in Tendring live in a deprived area, 1 in 5 children live in poverty.
- Compared to England overall, Tendring has:
 - Better than average local authority housing quality, lower levels of violent crime and a higher than average proportion of the elderly supported at home;
 - Average levels of serious and fatal road traffic accidents, by vehicle miles;
 - Low admissions due to alcohol, good children's dental health.
- Of concern: educational attainment at GCSE is below the England average.
- The proportion of local people who say their health is not good, is higher than average.
- Life expectancy is in line with the England average, as are deaths from smoking, cancers, heart disease and stroke. Health inequalities in life expectancy exist. Residents of the healthiest wards in Tendring live 7.2 years longer than those in the unhealthiest.
- The numbers in contact with drug misuse services are low, which may reflect low need or low access to services. Conversely numbers on GP mental health registers are high, which may reflect high need or high access to primary care services.
- Lifestyle estimates show high levels of obesity: 1 in 4 are obese. 1 in 4 smokes, 1 in 8 binge drinks and only 1 in 5 eats a healthy diet.
- The local community action plan highlights eight themes including promoting healthy living and action to narrow the health gap.

Health inequalities – life expectancy



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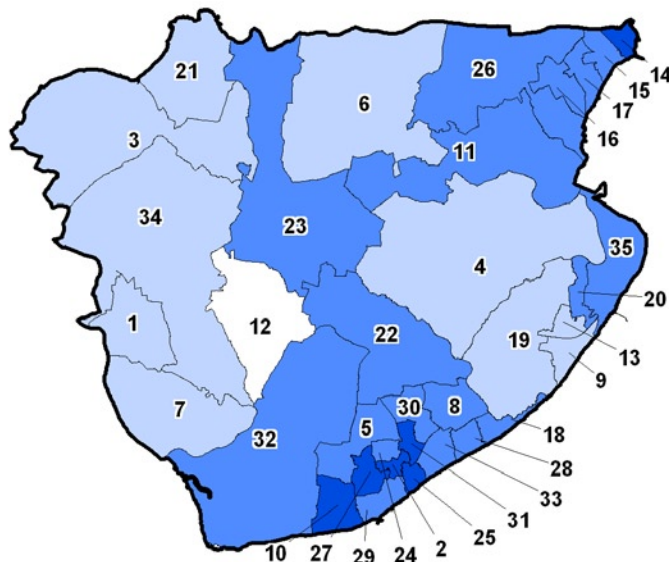
This map shows inequalities in life expectancy at birth for males and females combined, by ward. It is based on significance above and below the England average.

Comparison to England average (78.5 years) 2000-04

- Significantly lower
- Lower but not statistically significant
- Higher but not statistically significant
- Significantly higher

Life expectancy in the lowest fifth of wards is 75.5 years compared with 82.7 years for the highest fifth.

Health inequalities – deprivation



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This map shows deprivation by ward. The four categories are population-based, ie. 'most deprived 25%' refers to the most deprived wards accounting for 25% of England's population.

Index of Multiple Deprivation 2004 Ward averages

- Most deprived 25%
- Second most deprived 25%
- Second least deprived 25%
- Least deprived 25%

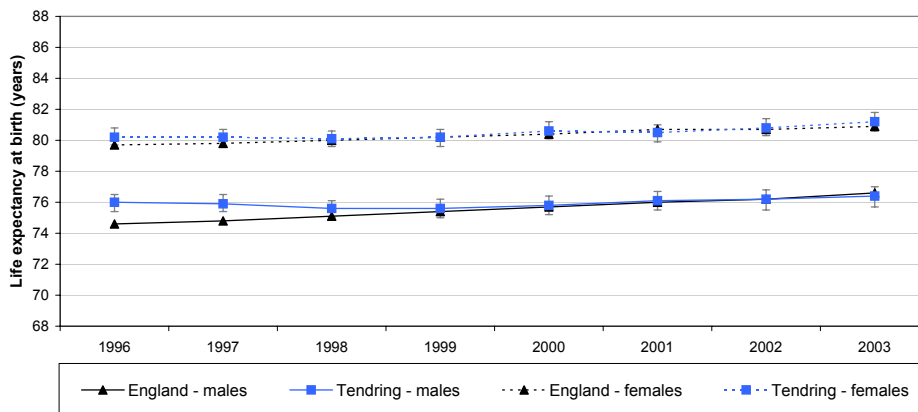
Ward legend

- | | | |
|-------------------------------|--|---|
| 1 Alresford | 15 Harwich East Central | 29 St James |
| 2 Alton Park | 16 Harwich West | 30 St Johns |
| 3 Ardleigh and Little Bromley | 17 Harwich West Central | 31 St Marys |
| 4 Beaumont and Thorpe | 18 Haven | 32 St Osyth and Point Clear |
| 5 Bockings Elm | 19 Holland and Kirby | 33 St Pauls |
| 6 Bradfield, Wrabness and Wix | 20 Homelands | 34 Thorrington, Frating, Elmstead and Great Bromley |
| 7 Brightlingsea | 21 Lawford | 35 Walton |
| 8 Burrsville | 22 Little Clacton and Weeley | |
| 9 Frinton | 23 Manningtree, Mistley, Little Bentley and Tendring | |
| 10 Golf Green | 24 Peter Bruff | |
| 11 Great and Little Oakley | 25 Pier | |
| 12 Great Bentley | 26 Ramsey and Parkeston | |
| 13 Hamford | 27 Rush Green | |
| 14 Harwich East | 28 St Bartholomews | |

Wards are Standard Table Wards, Census 2001. Boundaries may have changed.

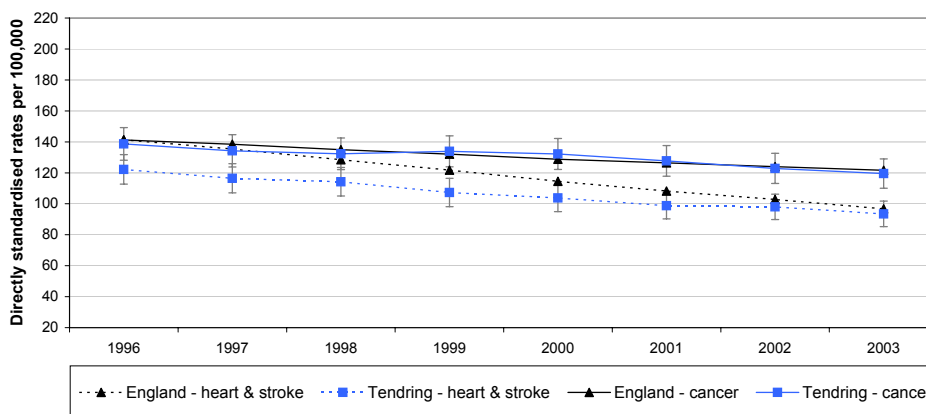
Health inequalities

Trend 1: Male and female life expectancy



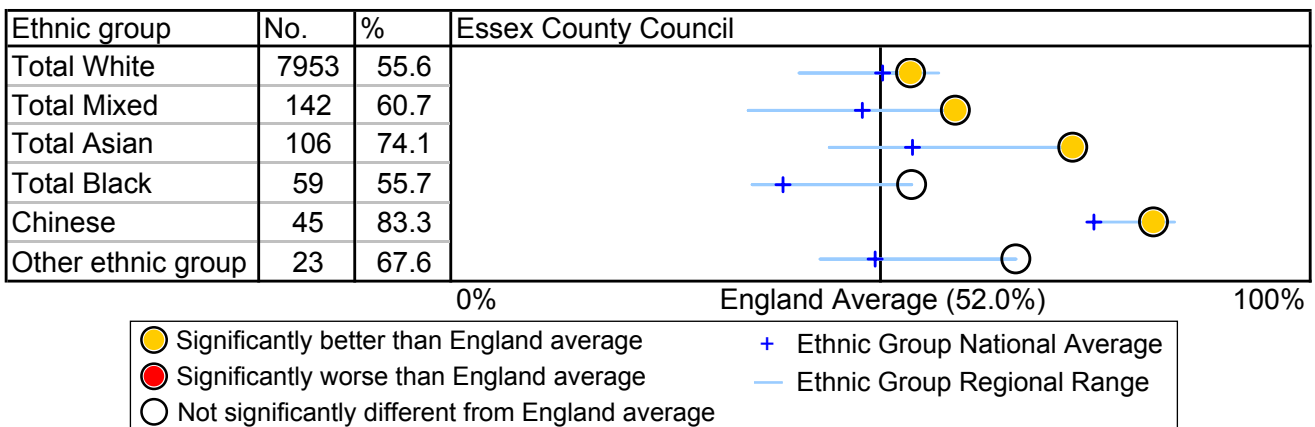
This chart compares the trends in life expectancy at birth for men and women in this area with that for England.

Trend 2: Deaths from heart disease/stroke and cancer



This chart compares the trends in deaths for all persons under 75 years due to heart disease/stroke and cancer in this area with that for England.

Health inequalities – GCSE achievement



This chart compares GCSE achievement (no. and % achieving 5 A*-C grades in 2003/04) of children in different ethnic groups in this education authority's schools to the England average for all children. Completeness of ethnicity coding varies for different indicators - GCSE achievement is one of the most complete, at 96%. Where less than 30 children in a particular ethnic group took GCSE exams the % pass rate is not shown.

Further information

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PROTOTYPE

Health summary

How to interpret:

First look at the circle which shows how this local authority is doing, compared with the England average (central line), best (right side) and worst (left side). Look at the numbers, values and time periods in the columns. Some numbers shown are totalled over more than 1 year. Red is significantly worse and amber significantly better than the England average (95% confidence intervals used for the local data). Amber may still indicate a significant public health burden. A clear circle is not significantly different from the England average. Then, compare with the regional average (+ symbol), and the range for similar areas - Coastal and countryside (— ONS Group cluster range).

Domain	Indicator	No.	Value		Trending	Period	Notes
Our communities	Deprivation	19,520	14.1	%		2001	1,2
	Air quality*					2001	2
	Poor quality housing*	945	28.8	%		01.04.05	3,10
	Children in poverty*	5,063	20.9	%		2001	2
	GCSE achievement (5 A*-C)*	683	44.6	%		2004/05	
	Violent crime	1,803	12.7	CR1		2004/05	
	Older people supported at home*	23,659	103.5	CR2		31.03.05	4
Giving children and young people a healthy start	Smoking in pregnancy						5
	Breast feeding						5
	Obese children*						5
	Physically active children*						5
	Teenage pregnancy (under 18)*	287	42.7	CR3		2001-03	
The way we live	People who smoke*		26.5	%		2000-02	6
	Binge drinking		12.5	%		2000-02	6
	Healthy eating		22.1	%		2001-02	6
	Physically active adults						5
	Obese adults		26.3	%		2000-02	6
How long we live and what we die of	Life expectancy - Male*		76.4	yrs		2002-04	
	Life expectancy - Female*		81.2	yrs		2002-04	
	Deaths - smoking	1,055	114.9	DSR1		2002-04	
	Early deaths - heart disease & stroke*	569	93.5	DSR2		2002-04	
	Early deaths - cancer*	710	119.5	DSR2		2002-04	
	Infant deaths (under 1 year)*	19	5.2	CR4		2002-04	
	Road injuries and deaths*	249	7.0	CR5		2003-04	7
Health and ill health in our community	Feeling "in poor health"	14,708	8.0	DSR3		2001	
	Mental health treatment	1,033	0.8	%		2005	8
	Alcohol related hospital stays	739	99.3	DSR4		1998-03	
	Drug misuse treatment*	189	433.8	CR6		2004/05	9
	People with diabetes	5,428	4.1	%		2005	9
	Children's tooth decay		0.7	DMFT		2003/04	10,11
	Sexually transmitted infections						5

● Significantly better than England average England Worst England Average England Best
● Significantly worse than England average + Regional average — Cluster range
○ Not significantly different from England average

Notes

Full indicator information in metadata report, see www.communityhealthprofiles.info

Notes	<p>1. No. and % of people in this area living in the 20% most deprived areas of England. 2. No significance is calculated for this indicator. 3. No data for authorities that have undertaken large scale voluntary transfer (LSVT). 4. Data only available for County/Unitary Authorities/London Boroughs; data presented at District Authority level is County data. 5. GAP indicator - no data currently available, but will be provided when it becomes available. 6. Synthetic estimates derived from the Health Survey for England. 7. New indicator - People killed or seriously injured per 100 million vehicle kilometres. 8. High rates considered 'better' as reflects better service provision. 9. High rates considered 'worse' as reflects high prevalence. 10. Data incomplete or missing for some areas. 11. DMFT: Average no. decayed, missing or filled teeth.</p>
Key	<p>* Supports PSA Targets 2005-2008.</p> <p>DSR1 Directly age standardised rate / 100,000 population aged 35 or over; DSR2 Directly age standardised rate / 100,000 population under 75; DSR3 Directly age standardised percentage; DSR4 Directly age standardised rate / 100,000 population; CR1 Crude rate / 1,000 population; CR2 Crude rate / 1,000 population aged 65 or over; CR3 Crude rate / 1,000 female population aged 15-17; CR4 Crude rate / 1,000 live births; CR5 Crude rate / 100 million vehicle kilometres; CR6 Crude rate / 100,000 resident population aged 15-44; CR7 Crude rate / 100,000 resident population.</p>