

# Health and Wellbeing Board

## 19 October 2016

<b>Report title</b>	Public Health Lifestyle Survey 2016	
<b>Decision designation</b>	AMBER	
<b>Cabinet member with lead responsibility</b>	Councillor Paul Sweet Public Health and Wellbeing	
<b>Key decision</b>	No	
<b>In forward plan</b>	No	
<b>Wards affected</b>	All	
<b>Accountable director</b>	Linda Sanders, People Directorate	
<b>Originating service</b>	Public Health	
<b>Accountable employee(s)</b>	Ros Jervis	Service Director for Public Health and Wellbeing
	Tel	01902 550347
	Email	Ros.Jervis@wolverhampton.gov.uk
<b>Report has been considered by:</b>	Public Health Senior Management Team	30 June 2016
	People Leadership Team	4 July 2016
<b>Updated report:</b>	People Leadership Team	10 October 2016

### Recommendation for action or decision:

The Health and Wellbeing Board is recommended to:

1. Accept the findings of the Wolverhampton Healthy Lifestyle Survey, support its use for the Joint Strategic Needs Assessment and determining future offers for healthy lifestyle services for the City.

## **1.0 Purpose**

- 1.1 The purpose of this report is to present the summary report and some of the more detailed analysis undertaken with data taken from the Wolverhampton Healthy Lifestyle Survey conducted in early 2016.

## **2.0 Background**

- 2.1 It has been estimated that around 80% of deaths from major diseases, for example, cancer and heart disease, are attributable to lifestyle risk factors such as smoking, excess alcohol consumption, lack of exercise and an unhealthy diet. These major causes of premature death are preventable conditions that are inextricably linked to lifestyle choices and deprivation.
- 2.2 In response to lower than national average life expectancy and healthy life expectancy figures the Director of Public Health Annual Report 2014/15 launched a prevention plan. One of the recommendations of the report was the development a lifestyle survey to provide information to shape the delivery of programmes to improve the health and wellbeing of the population.

## **3.0 The Wolverhampton Healthy Lifestyle Survey: key headlines**

- 3.1 A population lifestyle survey was commissioned by the City of Wolverhampton Council Public Health & Wellbeing Service. This was conducted between January and April 2016 by M-E-L Research.
- 3.2 A total of 9,048 residents of Wolverhampton over the age of 16 years participated in the doorstep survey. This is the biggest health survey ever conducted in Wolverhampton, collecting data on healthy eating, smoking, alcohol intake, physical activity and mental wellbeing. The survey also included three questions regarding resident satisfaction with council services. The survey sample was monitored throughout the period of the survey to ensure that the sample would represent the demographic profile of the City.
- 3.3 The aim of the survey was to identify the level of lifestyle risk factors across the city and identify what would help residents choose healthier options. It will provide ward level data on lifestyle risk factors not previously available. A copy of the full report from M-E-L Research can be accessed on request.

Some of the key headlines include:

### **Healthy Eating**

- Only 26% of respondents eat the recommended five portions of fruit and vegetables per day, of these, young people aged 16-19 years are least likely to eat their 'Five-a-day'
- 62% of respondents would like to eat more healthily and 50% would like help to eat more healthily
- Cheaper healthy food (39% of respondents) and more time to prepare healthy food

- (39% of respondents) were the most popular types of help wanted
- 55% of respondents are considered overweight or obese calculated from self-reported height and weight figures
- However, 51% of respondents calculated to be overweight and 17% of respondents calculated to be obese, thought they were at about the 'right weight'

### **Smoking**

- 22% of respondents currently smoke; socioeconomic status is linked to whether a person smokes or not. Only 13% of people living in the least deprived areas smoke, compared to 30% of people in the most deprived areas
- 58% of smokers would like to stop smoking; 33% do not want to stop and 9% did not know if they would like to stop
- 41% of smokers said that they did not need help to stop smoking

### **Alcohol intake**

- 18% of the population, 26% for men and 12% for women, drink at levels that potentially put them at risk (score of five or more on Audit C).
- 16-19 year olds are less likely to drink alcohol than older people, however those that do report drinking are just as likely to drink at harmful levels
- 52% of respondents stated that they drink alcohol; men (59%) were more likely to drink alcohol than women (46%). This is lower than the England average, where 85% men and 79% of women are reported to drink.

### **Physical activity**

- 77% of the population engage in moderate activity however only 10% are vigorously active
- 56% of respondents felt they did enough exercise for someone their age
- 58% would like to be more active and 32% would like help to become more active
- When asked 'what would help you to become more active?', 35 % stated having more time, followed by 28% requesting free access to a gym and 20% wanting lower prices for a gym

### **Mental Wellbeing**

- The average wellbeing score was slightly higher in Wolverhampton at 53.6 than the England average of 51.6. Although average wellbeing is higher in Wolverhampton, life satisfaction, happiness and sense of worthwhileness are all lower in Wolverhampton than the national average.
- Having a health condition or disability that limits daily activities leads to a significantly lower wellbeing score (44.9) than the Wolverhampton average
- 32% of respondents said that more money would increase their wellbeing and 9% stated that more time for themselves would help

### **Satisfaction with Council Services**

- Overall, how satisfied or dissatisfied are you with the following as a place to live:
  - Your neighbourhood: 84% were very or fairly satisfied
  - Wolverhampton as a whole: 62% were very or fairly satisfied
- How well informed do you feel about how council services are performing?
  - 55% of respondents felt very or fairly well informed

- Overall, how well do you think Wolverhampton City Council is performing?
  - 62% of respondents felt the City Council was performing very or fairly well

#### 4.0 The Wolverhampton Healthy Lifestyle Survey: Cluster analysis

- 4.1 Public Health is currently conducting a detailed analysis of the data which will provide ward level information, highlighting variation across the city and any inequalities. This will help shape and target services in the future to meet the needs of the local population.
- 4.2 The detailed analysis includes a cluster analysis where all the survey responses, after screening for completeness, were categorised accordingly into the seven lifestyle behaviours as described in table 1.

**Table 1: behaviours and levels used in the cluster analysis**

<b>Lifestyle behaviour</b>	<b>Levels</b>
<b>Healthy eater</b>	Yes/no (yes: five fruit and veg on average per day, cooked meal from scratch most days or more, ate takeaway or ready meals less than once or twice a week)
<b>Vigorously active</b>	Yes/no (yes: five times per week or more activity that gets you out of breath and sweaty lasting longer than ten minutes)
<b>Moderately active</b>	Yes/no (yes: five times per week or more activity that gets you breathing harder lasting longer than ten minutes)
<b>Ever smoked</b>	No, used to, currently
<b>Alcohol</b>	Abstain, low risk (Audit C five and less), high risk (Audit C score of over five)
<b>BMI category</b>	Underweight, healthy, overweight, obese
<b>Wellbeing</b>	Very low, below average, average, above average

- 4.3 A total of ten different clusters have been identified; and although behaviours can appear in more than one cluster, individuals can only appear in one cluster. Public health has identified the key features and behaviours for each cluster and identified where clustered individuals live across the city so that any recommendations can be targeted.
- 4.4 The table below provides a simple description of each of the ten clusters and its size by survey population. Further detail, including the ward distribution maps, has been attached for your information at Appendix one.

**Table 2: Cluster description**

Cluster	Description	Population size
1	Vigorously Active	8.7%
2	Healthy eaters	12.5%
3	Used to smoke	10.2%
4	Healthy weight; poor lifestyle	20.6%
5	Overweight	15.3%
6	Drinkers and smokers	9.2%
7	Obese and Average Wellbeing	12.2%
8	Underweights	2.8%
9	Below Average Wellbeing	6.2%
10	Very Low Wellbeing	2.3%

#### 4.5 So what?

It is important to understand and maximise the benefits from having access to data of this quality, the list below highlights a few:

- The survey report does not assume anything but collates responses received directly from people who live in Wolverhampton;
- The survey size was large enough to draw robust findings from the analysis undertaken and be considered representative for the whole population;
- Use of this survey information particularly in combination with others such as the Wolverhampton Health Related Behaviour Survey (for children) will support robust Joint Strategic Needs Assessment (JSNA) development for use by all commissioners across the City;
- The survey does not simply report on lifestyle behaviours but makes links to a variety of demographics including employment and educational attainment;
- The findings will support how we redesign future healthy lifestyle services for the City. This is particularly useful for clusters that demonstrate strong links between certain lifestyle behaviours such as alcohol and smoking, and the benefits that can be derived through the 'Making Every Contact Count' principle with a workforce that can support behaviour change across several different lifestyle factors, for example GPs, health visitors, teachers, and school nurses;
- Qualitative information will support social marketing campaigns;
- The cluster analysis will enable targeted work to take place with a view to reducing health inequalities; and
- The data could be used to develop a model around how lifestyle behaviours affect mental wellbeing, through the identification of factors that can be targeted to improve mental wellbeing.

## **5.0 Financial implications**

5.1 Funding for Public Health is provided to the Council by the Department of Health in the form of a ring-fenced grant and the grant allocation for 2016/17 is £21.9 million There are no direct financial implications related to the findings of the Wolverhampton Healthy Lifestyle Survey summary report. [GS/06102016/C]

## **6.0 Legal implications**

6.1 There are no legal implications related to this report.  
[TS/06102016/H]

## **7.0 Equalities implications**

7.1 This report does highlight historical and current health inequalities that can then be addressed through services commissioned by the City of Wolverhampton Council and other key partners across the Health and wellbeing Board.

## **8.0 Environmental implications**

8.1 There are no environmental implications of the report.

## **9.0 Human resources implications**

9.1 There are no human resource implications related to this report.

## **10.0 Corporate landlord implications**

10.1 There are no corporate landlord implications for the Council's property portfolio in relation to this report.

## **11.0 Schedule of background papers**

11.1 There are no background papers in relation to this report.