

JSNA Health and Wellbeing Profile 2021/22

Health and Wellbeing Profile for Bristol – 2020/21 summary

October 2021

Introduction

The Joint Strategic Needs Assessment (JSNA) is an ongoing process to identify current and future health and care needs for our population. It aims to inform decisions about how we design, commission and deliver services to improve and protect health and wellbeing of our residents, and address inequalities in health.

As part of this ongoing process, a Health and Wellbeing profile for Bristol is produced and published on the JSNA website (www.bristol.gov.uk/jsna). This profile is maintained and updated as new data become available, though the schedule of updates has been delayed this year due to the COVID-19 pandemic. The short report presented here is a summary of key demographic and health data for Bristol from this profile, particularly from those sections that have been updated over the past year.

Most of the data in the profile are not yet available beyond 2019, before the COVID-19 pandemic. As new national data are published in future years, we will be better able to understand the impacts of COVID-19 and implications for changing health and care needs among the people of Bristol. In the meantime, this summary to date helps provide a pre-pandemic baseline from which to assess changing health needs and opportunities for improving health of our population and reducing inequalities in health.

Our Population

The population of Bristol is estimated to be around 466,000 people and has grown 10% over the last decade (to 2020), faster than national population growth (7.2%). Since 2016, the rate of population growth has slowed. This is in-line with the UK population which last year grew at its slowest rate for 20 years. In Bristol, growth has been mainly concentrated in the inner city, especially among young adults.

Bristol's population is projected to increase to 499,200 by 2030 if pre-pandemic trends continue.

Births per year in Bristol increased to a peak of 6,800 in 2012 and have fallen gradually since then. In 2019 there were 5,557 births in Bristol.

Bristol has a relatively young age profile with a median age of 32.4 years, compared to 40.3 years nationally. Bristol's child population is projected to remain stable up to 2030, whilst the population of people over 75 years is projected to increase by 15% over 2020-2030.

Our population is increasingly diverse. Around 16% of the population were from BME backgrounds at the 2011 Census but amongst children it was much higher at around 28%.

Circumstances that influence our health

Our health is influenced by a range of social, economic and environmental factors – known as wider determinants of health. Poverty is a key influence, and particularly in early years.

15% of the city population live in the most deprived 10% of areas in England.

There are 15,400 children under 16 living in relative low-income families in Bristol, which is 18% of all children (2019/20 data). This figure is rising (from 15.7% in 2016/17) although in Bristol is lower than the UK average of 19%, and also lowest of the Core Cities. Parts of central and south Bristol have more than a quarter of children living in relative low-income families.

Around 13,600 older people (17%) in Bristol live in income deprived households.

Across Bristol there were 638 children in care at the end of March 2021 – a figure broadly similar to previous years. The number of children having a Child Protection Plan has reduced over the most recent year, to 215 at March 2021.

Nearly 79% of Bristol residents are satisfied with their local area, similar to the previous year. However, there is a gap of 29 % between those residents living in the 10% most deprived areas and the Bristol average. Fewer residents reported fear of crime affects their day-to-day life in 2019/20 compared to the previous year (15.7% compared with 18% the previous year).

Educational outcomes continue to show a wide gap between wards, but outcomes for those in the most 10% deprived areas at early Years Foundation Stage improved in 2019.

Unemployment in Bristol rose to 4.9% in the year to September 2020 and is higher than the national level.

The rate of recorded domestic abuse incidents and crimes in Bristol is similar to that nationally. For Bristol in 2019/20, 39.2% of all recorded domestic abuse related crimes were a repeat incident. There is limited official data so far on the impact of lockdown on domestic abuse. The Office for National Statistics (ONS) has reported substantial increase in calls to the National Domestic Abuse Helpline compared to t2019/20.

Bristol's rate of first-time entrants to the Youth Justice System has been slowing reducing in recent years (data up to 2019) but remains higher than the national average.

Life Expectancy

Compared to 10 years ago, men in Bristol now live 1.2 years longer, and women live 0.6 years longer, but the increase in life expectancy has levelled off in recent years. Life expectancy for men in Bristol is 78.5 years, just below the England average. For women life expectancy in Bristol is 82.8 years, also slightly lower than the England average). The gap in life expectancy between most and least deprived groups in Bristol shows no clear sign of reducing.

Healthy Life Expectancy is estimated at around 61 years in Bristol, below the national average. There is a 16-year gap in Healthy Life expectancy between most and least deprived groups in Bristol. For men and women, Healthy Life Expectancy has fallen slightly since 2009 but this fall is not statistically significant.

Premature mortality

Rates of deaths under the age of 75 years had been declining but have levelled off in recent years. Most of the reduction has been due to fewer early deaths from cardiovascular diseases, and fewer deaths from cancers. Premature mortality rates in Bristol's most deprived areas are around twice as high as in the least deprived.

Long Term Health Conditions

In Bristol there were 13,433 patients with a cancer diagnosis on GP practice registers in 2019/20. Cancer is the leading cause of early death in Bristol, with 1337 early deaths from cancers over the 3 years 2017-19. Early deaths from cancer in Bristol have not reduced significantly in recent years (latest data 2019). Cancer incidence and early deaths are higher in the more deprived areas. Screening coverage for breast and bowel cancer in Bristol is consistently significantly lower than the England average. The impact of Covid-19 on diagnosis and treatment for cancer will become clearer when 2020/21 diagnoses and admissions data are published.

Cardiovascular diseases (CVD) are the second commonest cause of early death among Bristol residents, accounting for 659 early deaths over 2017-19. 70% of these were among men. Early deaths from CVD have been declining since 2001, but this decline has levelled off in Bristol over recent years, with most recent data showing no significant change. Early deaths rates vary more than two-fold between Bristol's most and least deprived areas.

The national pause in NHS Health Checks during the pandemic has meant people at higher risk of CVD not receiving a check to help them reduce their risk.

Children's health

In 2019, 3.3% of all Bristol live births had a 'low birth weight', down from 7.6% in 2015. This is slightly higher than the England average (2.9%).

In 2019/20 there were 829 emergency hospital admissions due to unintentional and deliberate injuries in children aged 0 to 14 years. This is a rate of 102 per 10,000 children aged 0-14, significantly above the England average of 91 per 10,000. Among young people 15-24 years there were 1,219 injury admissions a rate of 158 per 10,000 population, significantly higher than the England average of 131 per 10,000. Injury admission rates in young people in Bristol have risen in recent years, the highest causes being intentional self-poisoning or self-harm. Children and young people in Bristol have higher than national rates of hospital admissions for mental health conditions and for self-harm.

Compared to the national average, Bristol has a significantly higher rate of children being admitted to hospital for extraction of decayed primary or permanent teeth.

Routine immunisations for pre-school children show declining coverage over the last few years. School-age immunisation rates are improving overall but still lag behind national and regional averages, particularly for HPV vaccine.

Rates of smoking in pregnancy vary greatly across the city, linked to patterns of socioeconomic deprivation. 9.6% of all pregnant women in across Bristol, North Somerset and South Gloucestershire are smoking at the time of delivery.

Around 1 in 4 children in reception year in Bristol (4-5 years old) and 1 in 3 of year 6 pupils (10-11 years old) have excess weight (are overweight or obese), from 2018/19 data. The rates have not changed significantly over the last decade. Excess weight in reception year pupils shows a strong association with deprivation; excess weight in year 6 pupils also tends to be higher in more deprived wards.

Older people

Emergency admissions for injuries due to falls in older people have risen slightly in Bristol over recent years and are significantly higher than the England average.

3,344 people in Bristol had a diagnosis of dementia recorded by their GP in 2019/20. Population projections for an increasing number of older people in Bristol mean dementia prevalence is projected to rise significantly.

Mental health and wellbeing

There were 55,547 people aged 18 and over with depression according to GP practice registers in 2019/20. This is over 10% increase since 2018/19. The prevalence of depression has been increasing since 2003/4, and in 2019/20 has increased to 12.6%. These data are pre-pandemic and in line with data from the UK Household Longitudinal Study which has been used to explore mental health during the pandemic, it is expected that we will see an increase in the 2020/21 data when it is published.

4.8% of Bristol residents reported a 'low life satisfaction score' (ONS score) in 2018/19, an increase on the previous year. The local Bristol Quality of Life (QoL) survey 2019/20 reports 75% of people satisfied with life, an increase on last year (68%). However, in the 10% most deprived areas, this figure drops significantly.

The 2018/19 rate of emergency admissions to hospital for self-harm increased by 7% compared to the previous year. The number of self-harm emergency admissions in 2018/19 was 1,593 admissions. The self-harm admissions rate in the most deprived areas of Bristol is 2.5 times higher than in the least deprived.

Sexual health

New sexually transmitted infections (STI) in Bristol continue to rise and are above both the regional and national levels. Addressing this need has been a challenge during COVID-19, which has affected how local sexual health services are delivered. More online STI testing and virtual consultations have been offered to reduce the need for face-to-face consultations where possible.

870 Bristol residents were living with diagnosed HIV in 2019. The proportion of HIV cases diagnosed late has reduced slightly.

The latest data (2019) show that Bristol had a higher rate (62.2 per 1,000) of long-acting reversible contraceptives (LARCs) delivered in primary care than England overall (30 per 1,000). There was a reduction in LARCs fitted in primary care during 2020/21 due to COVID-19 restrictions.

Healthy living

Over half the adult Bristol population are overweight or obese (54.8%). This is lower than the national average (62.3%) and the lowest of all core cities. The 2020/21 self-reported Bristol Quality of Life survey provides a lower estimate of 49% adults with excess weight. Poverty and deprivation are associated with a higher risk of excess weight in Bristol (and obesity even more so), but the relationship is complex and seems to affect women more than men in Bristol.

In 2019, 18% of Bristol adults smoked, up from 16.3% in 2018 although still down from the 21% seen in 2011. There is significant variation in smoking prevalence across the city which mirrors patterns of deprivation and health inequalities. There has been mixed evidence nationally of levels of smoking during the pandemic. Cohorts of smokers in the population who became aware of their increased risk of both contracting Covid-19 and of a potential poor outcome were likely to quit. There is also evidence amongst younger smokers of increased uptake and consumption which is likely linked to negative impacts on mental wellbeing.

Alcohol-related harm has risen in Bristol, as seen by a rising trend in admissions to hospital for alcohol-related conditions. There were 3,592 stays in hospital due to alcohol-related harm in 2019/20, higher than the national average. Admission rates are higher among the most deprived Bristol population.

Bristol has an estimated 4,940 opiate and/or crack users. Whilst the proportion of Bristol residents using drugs is relatively small the impact can be extensive. Bristol has the second largest estimated rate of opiate and/or crack users (per 1,000 population) of the English core cities.

Protecting our health

Bristol's seasonal flu immunisation coverage rates are broadly in line with the national averages for over 65s and for under 65s in a clinical risk group. There was a significant increase in uptake for over 65s in 2020/21 compared to the previous year, in Bristol and nationally. This is likely to be due to the COVID-19 pandemic and increased public awareness.

Tuberculosis (TB) incidence in Bristol shows a falling trend to 2019 (latest data 2017-19 average). 50 TB cases were notified in Bristol in 2019.

The COVID-19 pandemic has had wide ranging impacts on health and wellbeing. In terms of the disease itself, between March 2020 and late September 2021 Bristol has seen over 59,000 cases of COVID-19, and 6,583 Bristol residents have been in hospital with COVID-19. 657 Bristol residents have died of COVID-19 during this time. By late September 2021 70% of Bristol adults have had 2 doses of vaccine. Intelligence on longer term impacts (Long Covid) is not yet available.

Further data – useful overarching links and profiles

- Bristol JSNA webpages: www.bristol.gov.uk/jsna
- Health Profiles: summary information on health (and factors affecting health) for every local authority in England - <https://fingertips.phe.org.uk/profile/health-profiles>
- Public Health Outcomes Framework (PHOF): indicators on how well public health is being improved and protected - [Public Health Outcomes Framework - OHID \(phe.org.uk\)](https://publichealthoutcomesframework.org.uk/)
- Bristol Statistics page: www.bristol.gov.uk/statistics

Disclaimer: The “Health and Wellbeing Profile for Bristol – 2020/21 JSNA summary” report was submitted to the [Bristol Health and Wellbeing Board](https://www.bristol.gov.uk/health-and-wellbeing-board/) in October 2021, based on 2020/21 JSNA Data Profiles. It reflects data available up to March 2021 (plus a subsequent update on COVID-19).