Population Health & Healthcare Surveillance
Healthy Lifestyles

March 2019 Update

Summary Dashboard

	Indicator	Time Period	North East Value	North East Rank	National Average	Direction of Travel
Healthy Lifestyles	31. Smoking prevalence (%)	2017	16.2	8	14.9	
	32. Smoking prevalence - routine and manual (%)	2017	26.1	6	25.7	
	33. Excess weight in adults (%)	2016/17	66.1	9	61.3	
	34. Percentage of adults classified as inactive (%)	2016/17	24.6	8	22.2	
	35. Successful completion of drug treatment - opiates (%)	2017	4.9	9	6.5	
	36. Successful completion of drug treatment – non opiates (%)	2017	25.8	9	36.9	
	37. Alcohol related admissions to hospital (per 100,000)	2017/18	862	9	632	
	38. Social Isolation: % of adult social care users who have as much social contact as they would like	2017/18	49.8	1	46.0	
	39. Social Isolation: % of adult carers who have as much social contact as they would like	2016/17	44.8	1	35.5	

Compared with England   Significantly Better   Similar   Significantly Worse

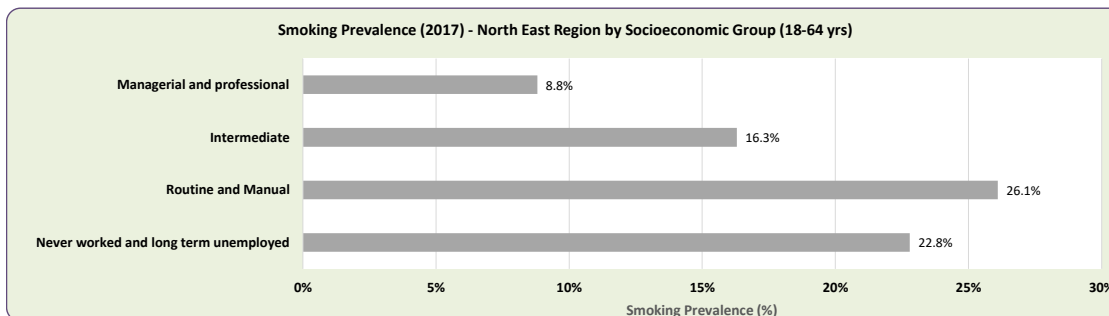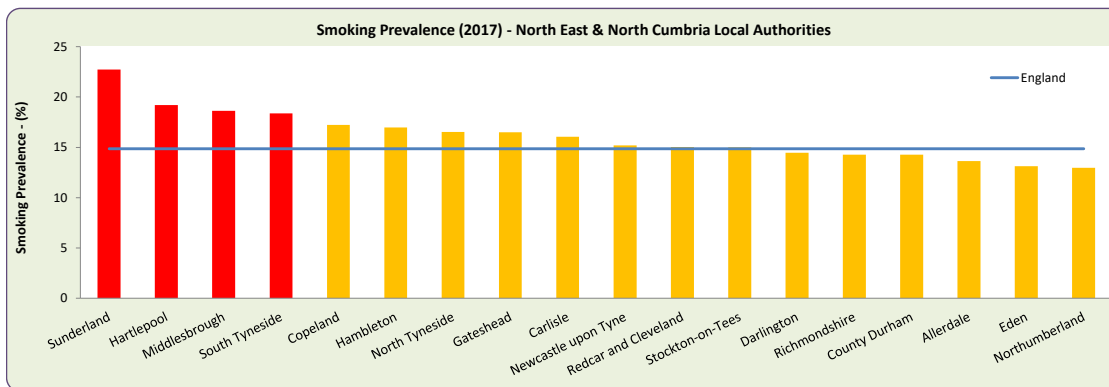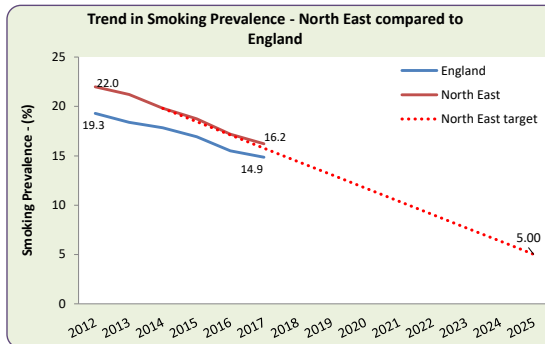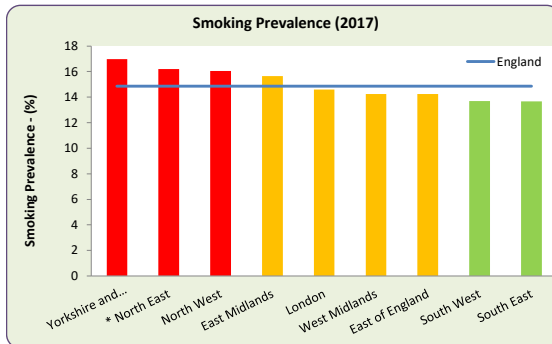*North East Rank amongst the 9 Regions*   1 - Best   9 - Worst

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What do the detailed pages show?

The following pages contain further information for each indicator, including data comparing each region in England, trend data over time for England and the North East where available and the latest information at local authority level for the North East and North Cumbria. A narrative section explains the key findings from the data and also includes data sources and definitions.

	Significantly Better		Similar		Significantly Worse

31. Smoking Prevalence (2017)

Prevalence of smoking among persons aged 18 years and over.

Yorkshire and the Humber	*North East*	North West	East Midlands	London	West Midlands	East of England	South West	South East		England
17.0	16.2	16.1	15.7	14.6	14.2	14.2	13.7	13.7		14.9

Smoking Prevalence (2017)

Trend in Smoking Prevalence - North East compared to England

Smoking Prevalence (2017) - North East & North Cumbria Local Authorities

Smoking Prevalence (2017) - North East Region by Socioeconomic Group (18-64 yrs)

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info)

Definitions / Notes

The health risks of smoking are well documented and accepted. Smoking is the most important cause of preventable ill health and premature mortality in the UK. It is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. It is also associated with cancers in other organs, including lip, mouth, throat, bladder, kidney, stomach, liver and cervix.(1)

What is the data telling us?

In 2017, adult smoking rates in the North East region were the second highest of all the English Regions. However, smoking prevalence has declined in the North East slightly faster than the national average and this appears to be because of higher quit success rates.[29] Nationally, between 2012 and 2017, smoking prevalence rates reduced by 4.4 percentage points - from 19.3% in 2012 to 14.9% in 2017. By contrast, the prevalence rate in the North East fell by 5.8 percentage points - from 22.0% in 2012 to 16.2% in 2017. In 2014 the 12 local authorities in the North East committed to working towards a bold ambition to reduce adult smoking to 5% by 2025.[30]

Many of the constituent Local Authorities in the NENC AHSN region demonstrate adult smoking prevalence rates which are similar to the national average. In 2017, rates were highest in Sunderland (22.75%) and lowest in Northumberland (13.0%). In fact Sunderland had the second highest rate amongst all local authorities in England in 2017.

There is a clear social gradient in smoking behaviour, with individuals in routine and manual occupations and those in the "never worked and long term unemployed" category the most likely to smoke. In the North East smoking prevalence in 2017 amongst those in routine and manual jobs was 26.1% compared to only 8.8% amongst those in managerial and professional jobs. Research suggests that successful quit rates also vary according to the same social gradient. On the next page of this report we look in more detail at smoking rates amongst those in routine and manual occupations.
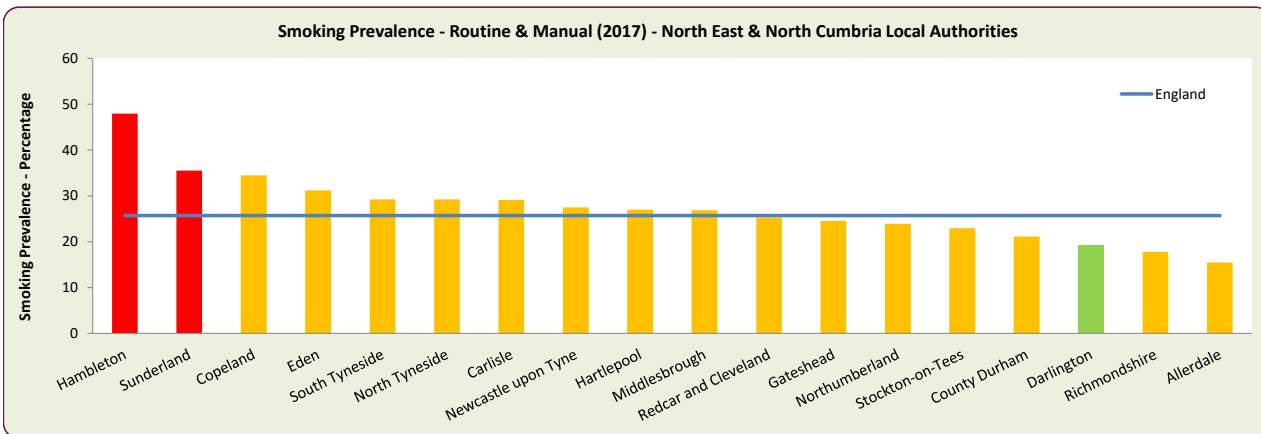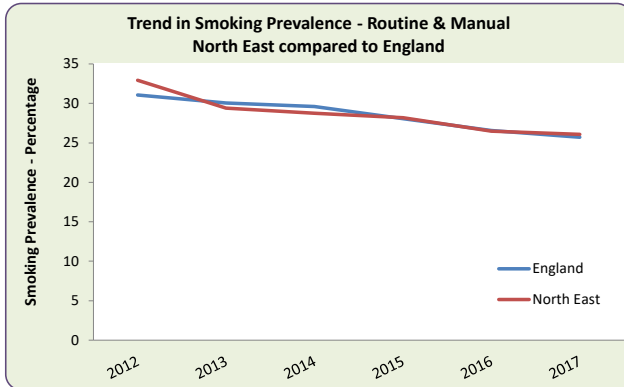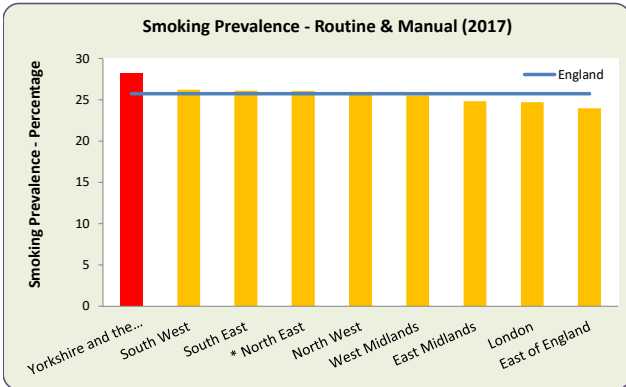
29. Public Health Outcomes Framework Data tool. Indicator Portal http://www.phoutcomes.info
30. Rutter A, West R. Modelling how to achieve 5% adult smoking prevalence by 2025: a regional approach. Tobacco Induced Diseases. 2018;16(1):28. doi:10.18332/tid/84018. http://www.tobaccoinduceddiseases.org/Modelling-how-to-achieve-5-adult-smoking-prevalence-by-2025-a-regional-approach,84018,0,2.html

Healthy Lifestyles

32. Smoking Prevalence - Routine & Manual (2017)

Prevalence of smoking among persons aged between 18-64 years in the routine and manual group.

Yorkshire and the Humber	South West	South East	North East	North West	West Midlands	East Midlands	London	East of England		England
28.2	26.2	26.1	26.1	26.0	25.5	24.8	24.7	24.0		25.7

Smoking Prevalence - Routine & Manual (2017)

Trend in Smoking Prevalence - Routine & Manual
North East compared to England

Smoking Prevalence - Routine & Manual (2017) - North East & North Cumbria Local Authorities

Healthy Lifestyles

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes

**What is the data telling us?**
The data shows a promising picture with smoking rates for routine and manual workers similar to, and falling at a similar rate to, those observed nationally. The smoking rate in 2017 has decreased in the North East in this group to 26.1% which is higher than the national average for this group, but not significantly so.

Within the NENC AHSN region, there is only one Local Authority area that shows statistically significantly lower rates of smoking in this group than those observed for England, but two have rates which are significantly higher.

33. Excess weight in adults (2016/17)

Percentage of adults (aged 18+) classified as overweight or obese.

North East	Yorkshire and the Humber	West Midlands	East Midlands	North West	East of England	South West	South East	London		England
66.1	65.3	63.6	63.3	63.3	61.9	60.3	59.7	55.2		61.3
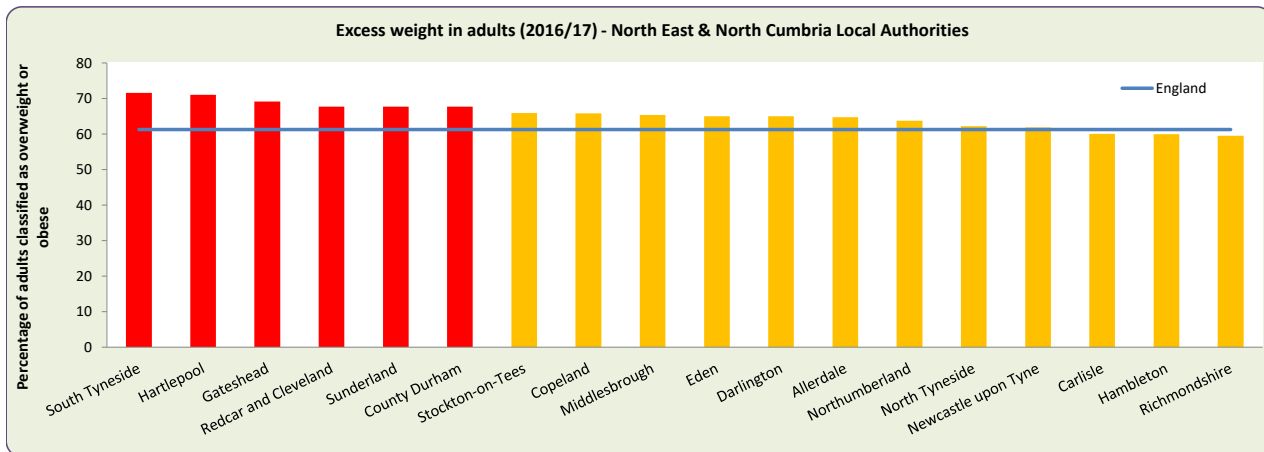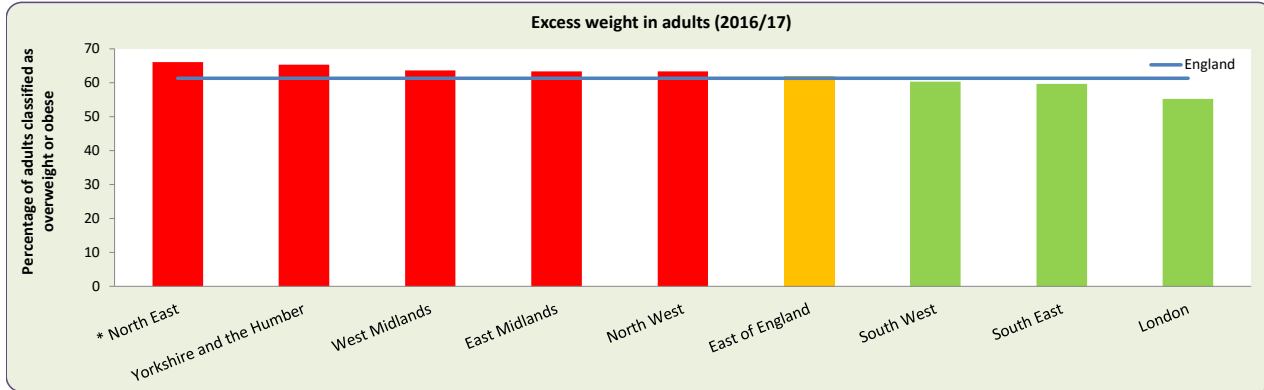
Excess weight in adults (2016/17)

Excess weight in adults (2016/17) - North East & North Cumbria Local Authorities

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Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes

Excess weight in adults is associated with a wide range of health problems including: musculoskeletal problems such as osteoarthritis and low back pain, increased risk of hypertension, cardiovascular disease, thrombosis and embolism, type 2 diabetes, cancer, reproductive and urological problems, fatty liver disease, gall stones and gastro-oesophageal reflux, social and psychological problems.

The data source for this indicator is the Active Lives Survey which is carried out by Sport England.[31] As the data are self-reported they are likely to under-estimate the prevalence of overweight and obesity.
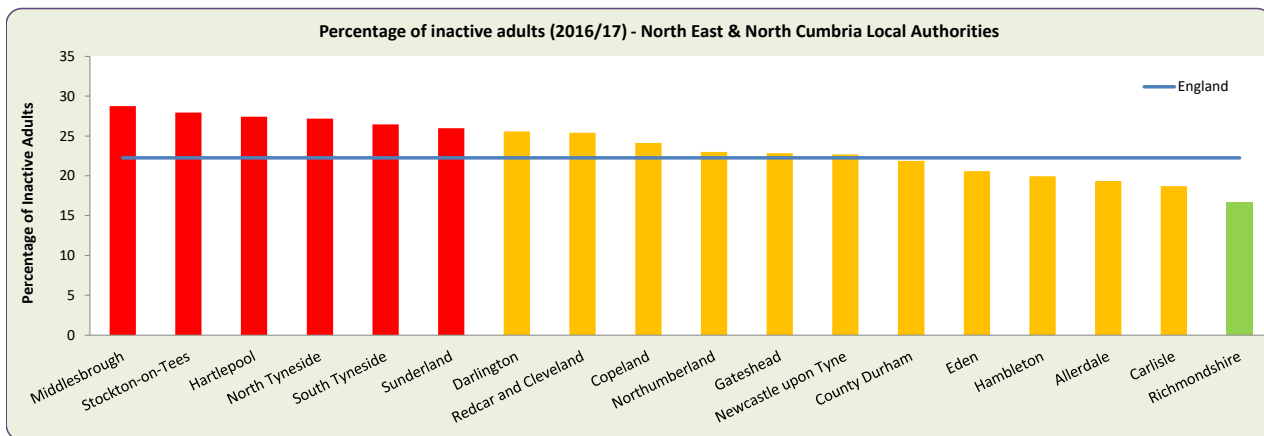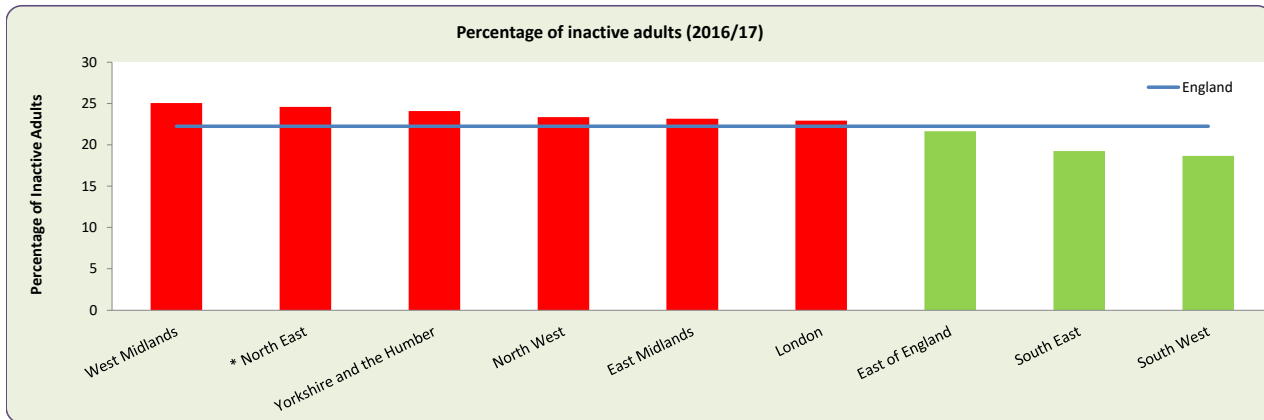
What is the data telling us?

For the period 2016/17 the observed rates of excess weight in adults were higher in the North East Region than any of the other English Health regions. At regional level, the prevalence of excess weight in adults was significantly higher than the national average in several of the NENC AHSN region constituent local authorities and the highest rate was observed in South Tyneside.

31. https://www.sportengland.org/research/active-lives-survey/

Healthy Lifestyles

34. Percentage of adults classified as inactive (2016/17)

The number of respondents in the Active Lives Survey aged 19 and over, with valid responses to questions on physical activity, doing less than 30 "moderate intensity equivalent" minutes of physical activity per week in bouts of 10 minutes or more, in the previous 28 days, expressed as a percentage of the total number of respondents aged 19 and over.

West Midlands	North East	Yorkshire and the Humber	North West	East Midlands	London	East of England	South East	South West	England
25.0	24.6	24.1	23.4	23.1	22.9	21.7	19.3	18.7	22.2

Percentage of inactive adults (2016/17)

Percentage of inactive adults (2016/17) - North East & North Cumbria Local Authorities

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Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes

Physical inactivity is estimated to be the main cause for around one quarter of the burden of breast and colon cancer, diabetes and ischaemic heart disease.

Regular activity reduces the risk of the problems listed above as well as stroke, depression and falls. It is also key to tackling obesity.

This indicator has been calculated from Active Lives,[32] a self-report survey, which is subjective and is influenced by the respondent's ability to recall and assess their physical activity levels. The data may also be affected by respondent desire to conform to expectations and social norms However, although this might affect the absolute values, this should not affect comparisons if the bias is consistent across populations.

What is the data telling us?

In 2016/17, inactivity levels in the North East region were the second highest of all of the English health regions at 24.6%.
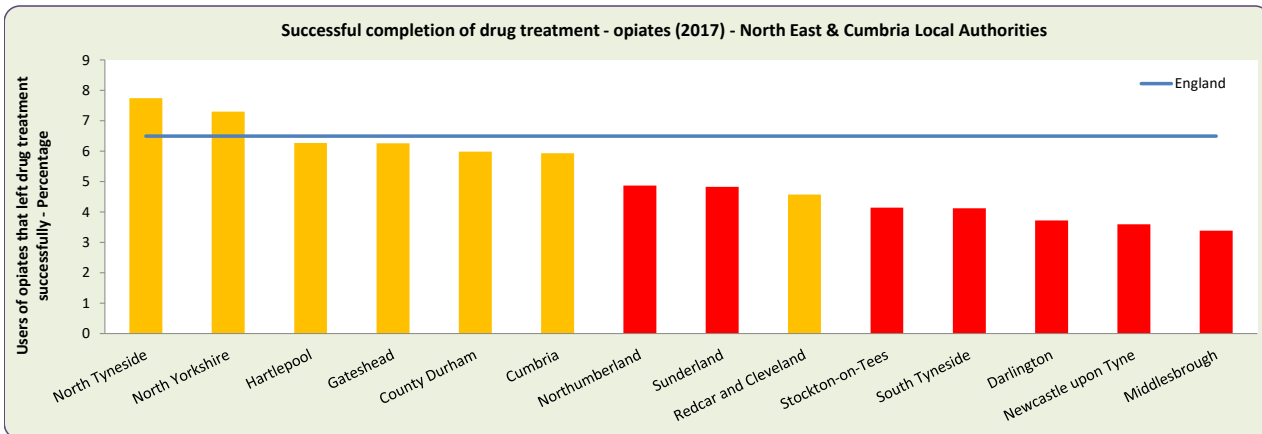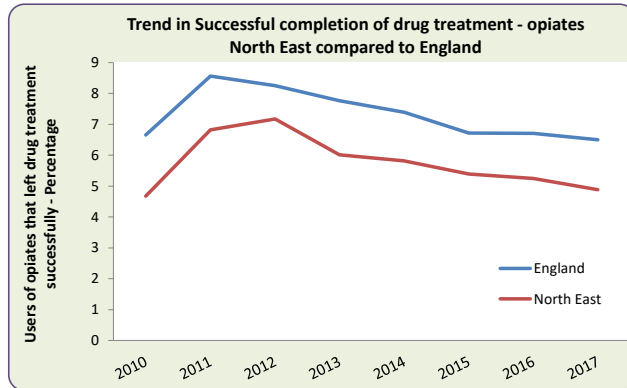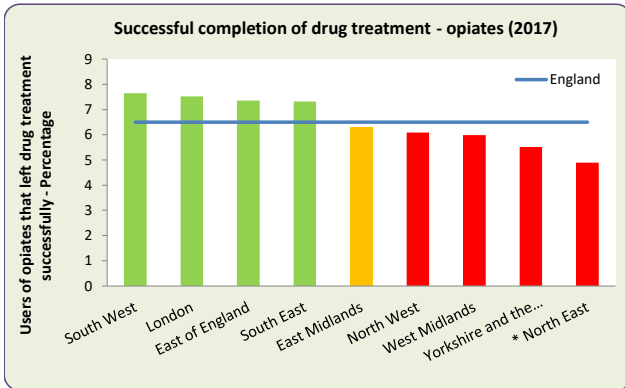
Within the Region rates of adult inactivity are significantly higher (worse) than the national rate in six of the constituent Local Authorities and significantly lower (better) in only one Local Authority.

32. https://www.sportengland.org/research/active-lives-survey/

Healthy Lifestyles

35. Successful completion of drug treatment - opiates (2017)

Number of users of opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a percentage of the total number of opiate users in treatment.

South West	London	East of England	South East	East Midlands	North West	West Midlands	Yorkshire and the Humber	North East		England
7.6	7.5	7.4	7.3	6.3	6.1	6.0	5.5	4.9		6.5

Successful completion of drug treatment - opiates (2017)

Trend in Successful completion of drug treatment - opiates North East compared to England

Successful completion of drug treatment - opiates (2017) - North East & Cumbria Local Authorities

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes

Substance misuse has a negative effect on health, wellbeing and quality of life. It also has an important effect on wealth. Crimes related to drugs cost the UK £13.3 billion every year.[33] Individuals achieving this outcome demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health.[34]

What is the data telling us?

The data demonstrates challenges for the North East region in terms of successful drug treatment for opiate users. The North East region recorded the lowest successful completion rate of any of the English health regions with a fall from 7.2% in 2012 to 4.9% in 2017. Nationally there was also a fall from 8.6% in 2011 to 6.5% in 2017.

Within the NENC AHSN region, data for seven of the Local Authority areas indicate significantly lower success rates than those observed nationally in 2017. The rate for Middlesbrough residents was the lowest in the NENC region and the third lowest in England i.e. 3.4% compared to a rate of 7.8% recorded for North Tyneside.
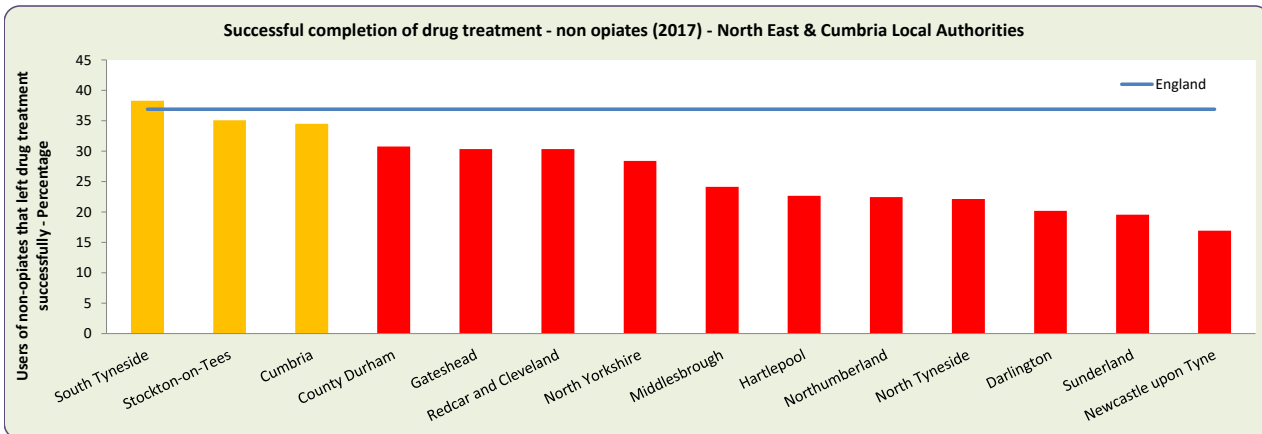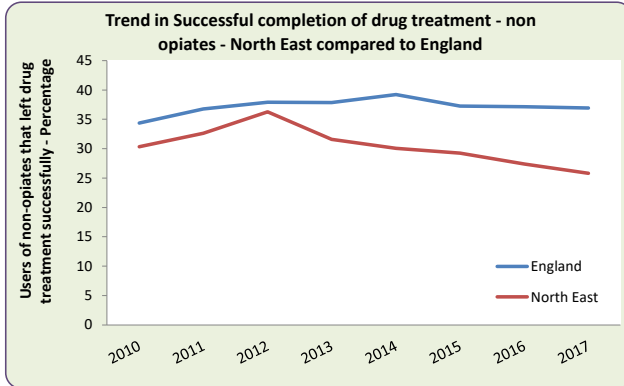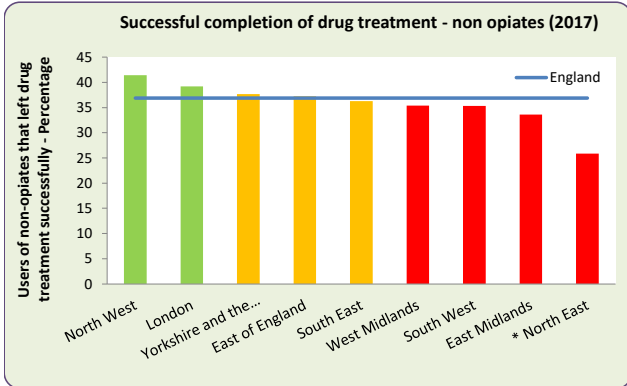
33. https://www.gov.uk/government/publications/2010-to-2015-government-policy-drug-misuse-and-dependency/2010-to-2015-government-policy-drug-misuse-and-dependency
34. Public Health Outcomes Framework Data tool. Indicator Portal http://www.phoutcomes.info

Healthy Lifestyles

	Significantly Better		Similar		Significantly Worse

36. Successful completion of drug treatment - non opiates (2017)

Number of users on non-opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a percentage of the total number of non-opiate users in treatment.

North West	London	Yorkshire and the Humber	East of England	South East	West Midlands	South West	East Midlands	North East		England
41.4	39.2	37.7	37.2	36.3	35.4	35.3	33.6	25.8		36.9

Successful completion of drug treatment - non opiates (2017)

Trend in Successful completion of drug treatment - non opiates - North East compared to England

Successful completion of drug treatment - non opiates (2017) - North East & Cumbria Local Authorities

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes

Substance misuse has a negative effect on health, wellbeing and quality of life. It also has an important effect on wealth. Crimes related to drugs cost the UK £13.3 billion every year.[35] Individuals achieving this outcome demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health.[36]

What is the data telling us?

The 2017 data shows a worsening picture compared with that previously observed. Successful treatment rates recorded for non opiate drug users in the North East region (25.8%) were the lowest of all the English Health Regions and statistically significantly lower than those seen nationally (36.9%). Trend data show this fall in the last five years despite a period of sustained improvement between 2010 and 2012.

Within the NENC AHSN region during 2017, records showed significantly lower success rates than those observed nationally for all but three of the Local Authority populations. The rate for Newcastle residents was the lowest in the NENC region (16.9% compared with a rate of 38.3% recorded for residents of South Tyneside).
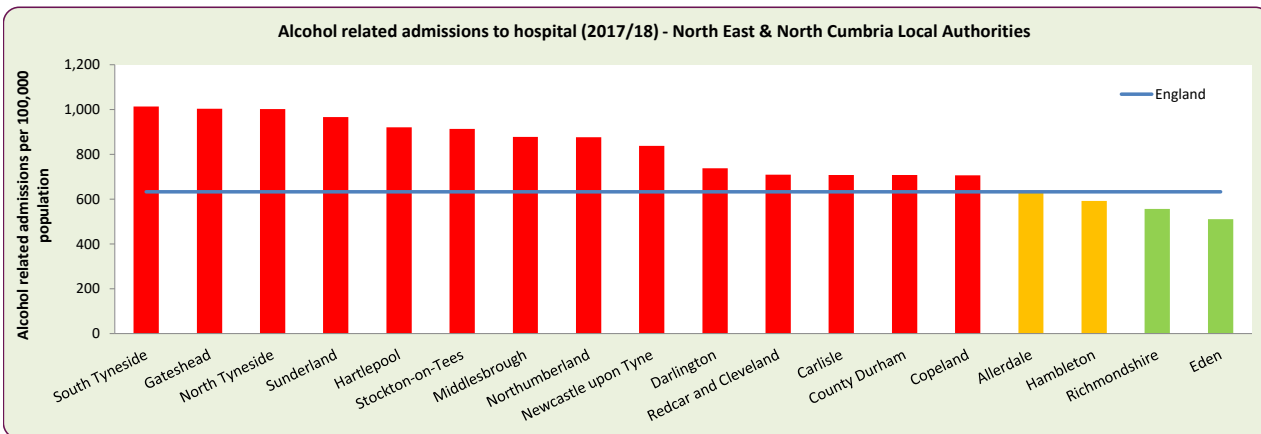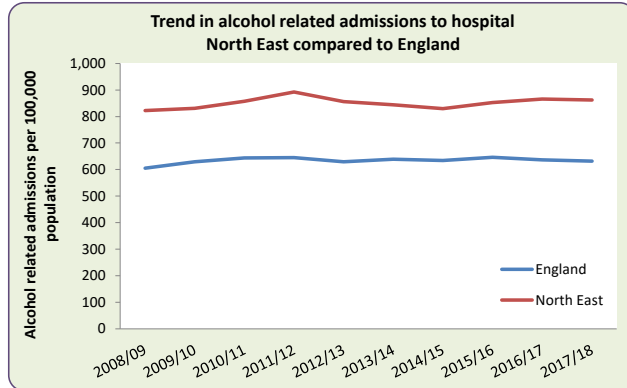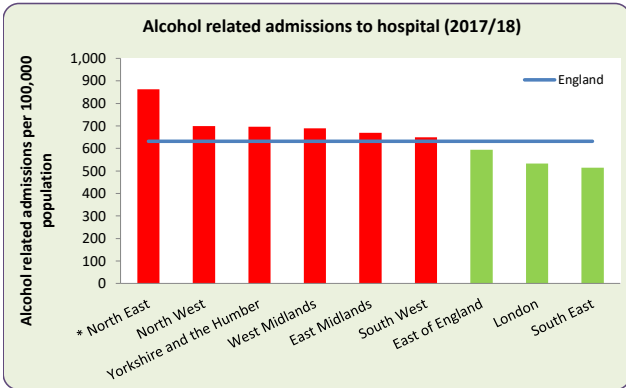
35.https://www.gov.uk/government/publications/2010-to-2015-government-policy-drug-misuse-and-dependency/2010-to-2015-government-policy-drug-misuse-and-dependency
36. Public Health Outcomes Framework Data tool. Indicator Portal http://www.phoutcomes.info

Healthy Lifestyles

		Significantly Better		Similar		Significantly Worse

37. Alcohol related admissions to hospital (2017/18)

The number of admissions involving an alcohol-related primary diagnosis or an alcohol-related external cause per 100,000 population (age standardised).

North East	North West	Yorkshire and the Humber	West Midlands	East Midlands	South West	East of England	London	South East		England
862	700	697	690	669	650	594	533	515		632

Alcohol related admissions to hospital (2017/18)

Trend in alcohol related admissions to hospital North East compared to England

Alcohol related admissions to hospital (2017/18) - North East & North Cumbria Local Authorities

Healthy Lifestyles

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).
Hospital Episode Statistics (HES) Copyright © 2019, Re-used with the permission of NHS Digital. All rights reserved.

Definitions / Notes
Alcohol misuse is a growing public health problem in England. Chronically heavy drinking, binge drinking and alcohol dependency poses a problem to the health and wellbeing of the drinker, their family and friends, as well as society in general. Alcohol is acutely associated with accidental injury, suicide, crime and violence. Long term alcohol misuse increases the risk of diseases including liver cirrhosis, hypertension, coronary heart disease, pancreatitis, and depression. Alcohol also increases the risk of common cancers such as breast, bowel, colorectal, oesophageal, pharynx, liver and mouth.[37] This indicator measures the impact of alcohol on hospital services.

What is the data telling us?
In the North East hospital admission rates relating to alcohol have been persistently higher than the national average. Both regionally and nationally, rates appear fairly static over the past decade. During the period 2017/18, hospital admission rates in the North East were higher than in any of the other regions. The admission rate of 862 per 100,000 for the North East was 68% higher than that observed in the South East region.
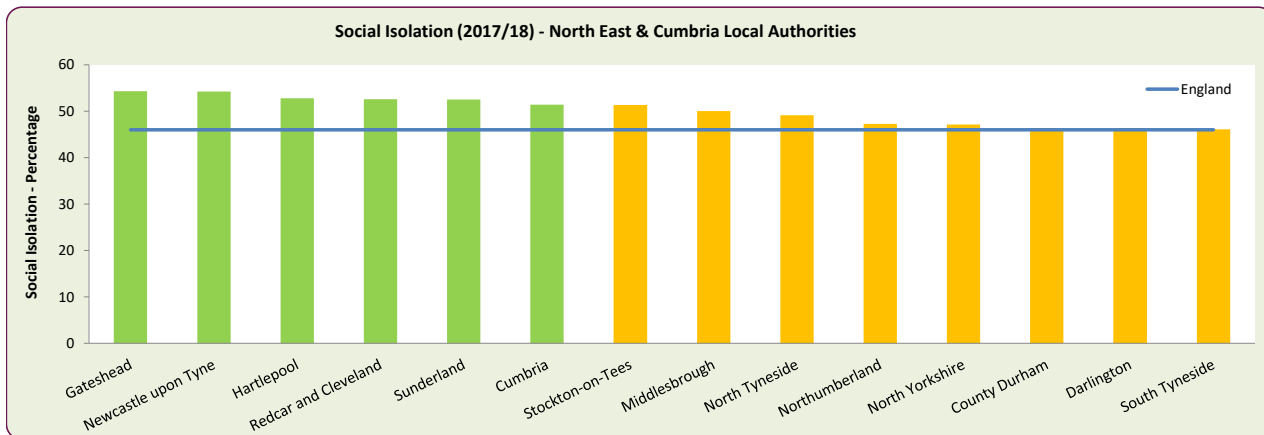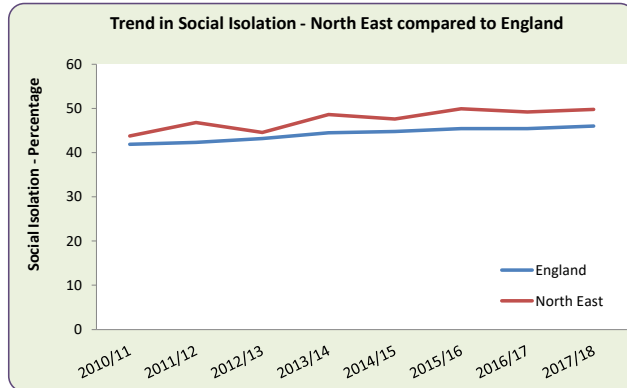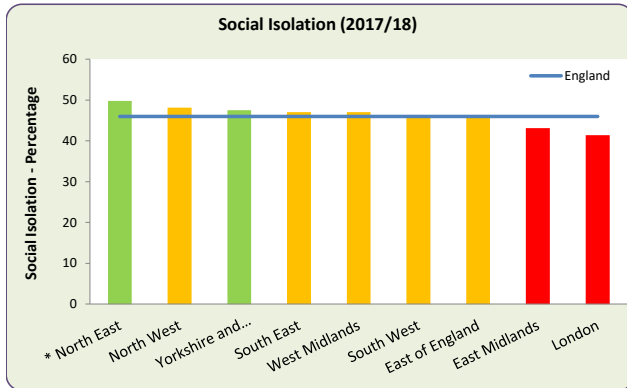
Across the NENC AHSN region, observed rates remain significantly higher than the national average for the majority of local authority populations. In 2017/18, the rate for the South Tyneside population was nearly twice that observed for the Eden population.

37.Faculty of Public Health: Alcohol and Public Health - Position statement
 www.adph.org.uk/wp-content/uploads/2013/08/alcohol_position_statement_final.pdf

38. Social Isolation: % of adult social care users who have as much social contact as they would like (2017/18)

The percentage of respondents to the Adult Social Care Users Survey who responded to the question "Thinking about how much contact you've had with people you like, which of the following statements best describes your social situation?" with the answer "I have as much social contact as I want with people I like".

North East	North West	Yorkshire and the Humber	South East	West Midlands	South West	East of England	East Midlands	London		England
49.8	48.1	47.5	47.0	47.0	46.0	45.9	43.1	41.4		46.0

Social Isolation (2017/18)

Trend in Social Isolation - North East compared to England

Social Isolation (2017/18) - North East & Cumbria Local Authorities

Healthy Lifestyles

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes

Social isolation and loneliness are key public health challenges. Older people are especially vulnerable after the loss of friends and family, reduced mobility or income. Loneliness is associated with higher rates of mortality, hypertension and depression.

The data for this indicator is derived from responses to the NHS Digital Personal Social Services Adult Social Care Survey, England. The indicator measures the percentage of respondents to the survey who responded to the question "Thinking about how much contact you've had with people you like, which of the following statements best describes your social situation?" with the answer "I have as much social contact as I want with people I like".

Changes to the survey methodology in 2014/15 may mean that previous years' data are not comparable with data from 2014/15 onwards.
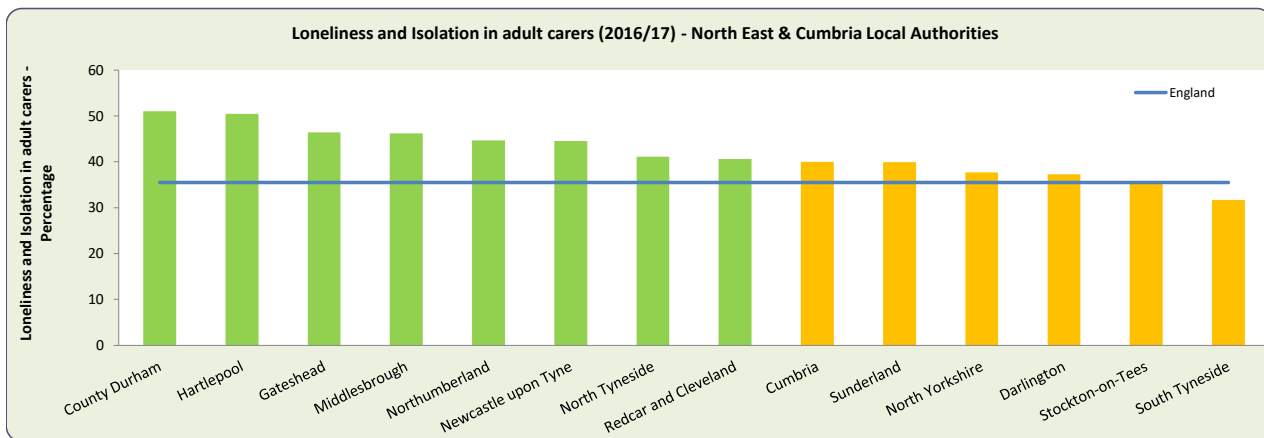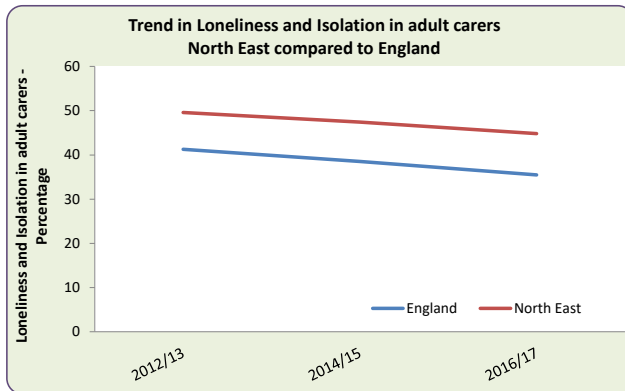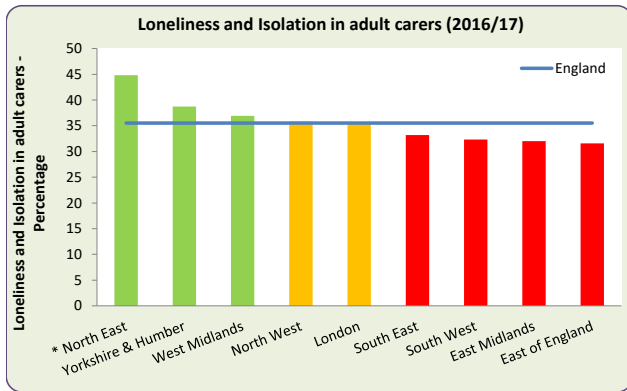
What is the data telling us?

Just under half (49.8%) of the adults using social care services in the North East region in 2017/18 reported that they had as much contact with others as they would like. This proportion was significantly better than the national average and the best of all the regions. Within the NENC AHSN region, no Local Authority areas were significantly worse than the national average, and six Local Authorities had a significantly better rate.

39. Social Isolation: % of adult carers who have as much social contact as they would like (2016/17)

The percentage of respondents to the Personal Social Services Adult Carers Survey who responded to the question "Thinking about how much contact you have had with people you like, which of the following best describes your social situation?" with the answer "I have as much social contact as I want with people I like".

North East	Yorkshire & Humber	West Midlands	North West	London	South East	South West	East Midlands	East of England		England
44.8	38.7	36.9	35.8	35.6	33.2	32.3	32.0	31.6		35.5

Loneliness and Isolation in adult carers (2016/17)

Trend in Loneliness and Isolation in adult carers
North East compared to England

Loneliness and Isolation in adult carers (2016/17) - North East & Cumbria Local Authorities

Data source: Public Health Outcomes Framework Data tool. Indicator Portal (http://www.phoutcomes.info).

Definitions / Notes
This indicator has not been updated in this report as the survey only takes place every other year.

The data for this indicator is derived from responses to the NHS Digital Personal Social Services Survey of Adult Carers in England. The indicator measures the percentage of respondents to the survey who responded to the question "Thinking about how much contact you have had with people you like, which of the following best describes your social situation?" with the answer "I have as much social contact as I want with people I like".

What is the data telling us?
The 2016/17 survey data indicate that carers in the North East are less socially isolated than their counterparts in the rest of England with 44.8% reporting adequate social contact compared with 35.5% on average nationally and only 31.6% in the East of England region. Within Local Authority areas across the NENC AHSN region, the survey data is generally significantly better than, and at worse, similar to elsewhere in England (on average).

Healthy Lifestyles