

Wigan Borough Joint Strategic Needs Assessment

Population Health Summary 2024



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What is a JSNA?

A Joint Strategic Needs Assessment (JSNA) is defined as "a process to identify the current and future health and wellbeing needs of a population in a local authority area" (Department of Health, 2013). In Wigan, as set out in Progress with Unity: A new era for Wigan Borough², we take a strengthsbased approach when considering how to help our residents and communities to flourish. In particular, the first mission of Progress with Unity is to create fair opportunities for all children, families, residents and businesses. This cannot be achieved without ensuring that we understand the enablers and barriers to building good health in our communities.

Incorporating this approach, our JSNA outlines the strengths and assets that support good health in the borough, while also identifying inequalities and the health needs of our residents. This report is intended to enable effective strategic planning and to determine what actions, as a Wigan partnership, we need to take to support our communities, meet residents' needs, and build on these local strengths to ultimately improve the health and wellbeing of our population.

Mission 1

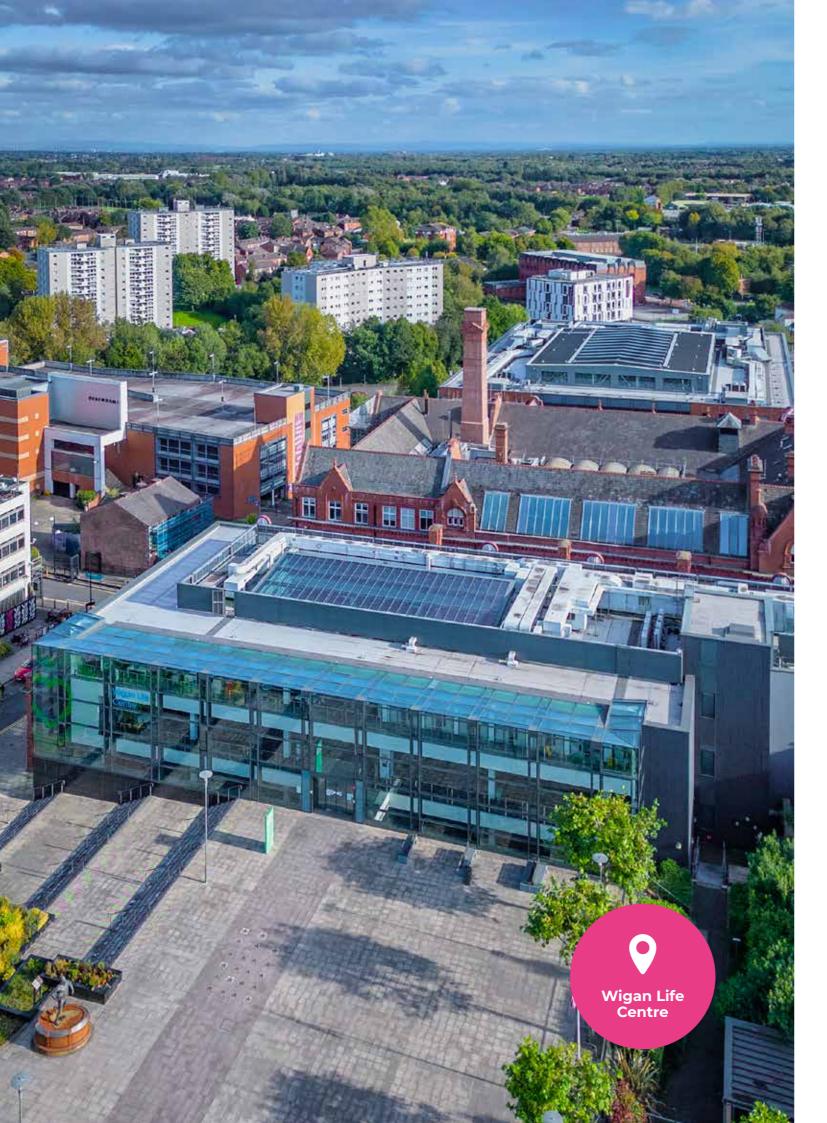
Create fair opportunities for all children, families, residents & businesses.

Mission 2

Make all our towns and neighbourhoods flourish for those who live and work in them.

^{1.} JSNAs and JHWS statutory guidance: https://www.gov.uk/government/publications/jsnas-and-jhws-statutory-guidance

^{2.} See: https://www.wigan.gov.uk/Council/Progress-with-Unity/About-Progress-with-Unity.aspx



Scope

This JSNA Summary Report aims to provide a brief and high-level summary of the health and wellbeing of the population of Wigan Borough. It forms part of an evolving suite of needs assessments that together provide a detailed understanding of the area and its residents.

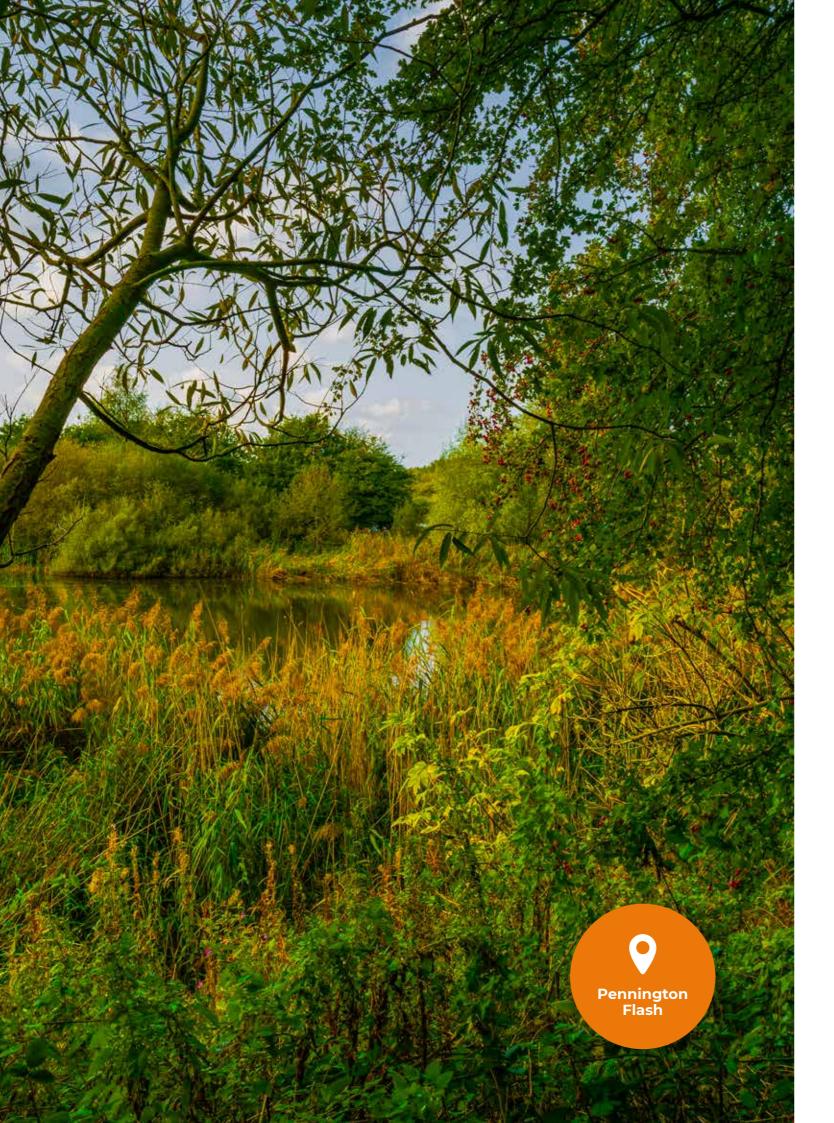
This report covers the period 2023/24, and includes the latest data as of October 2024; the report will be reviewed and updated annually as new data is released. Information sources

are listed in footnotes on each page, with links to data provided wherever possible.

This report should be read in conjunction with the Office for Health Improvement and Disparities Public Health Outcomes Framework³ and Child and Maternal Health profile,⁴ which outline additional health and wellbeing measures. An illustrative 'summary-on-a-page' of key health measures in the borough compared to England is also provided in this report.



- 5. OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public- health-outcomes-framework
- 4. OHID Fingertips: Child and Maternal Health profile, see: https://fingertips.phe.org.uk/profile/child-health-profiles



Introduction

Wigan Borough is a proud place, encompassing 14 towns including Wigan and Leigh, and a population of 330,000 residents. We have a rich history and a vibrant sporting, arts, and cultural heritage. The borough has plenty of great places to explore, complemented by many outdoor spaces to enjoy. Geographically it lies between the major cities of Manchester and Liverpool with great transport links in all directions, making Wigan an ideal destination to live, work and visit.

Over many years we have made notable progress in Wigan Borough in supporting people to live healthier lives. Over the last two decades, deaths from heart disease, respiratory illnesses, and cancers have greatly declined – a direct result of actions taken to prevent the causes of these illnesses and ensure access to high quality healthcare in the area.

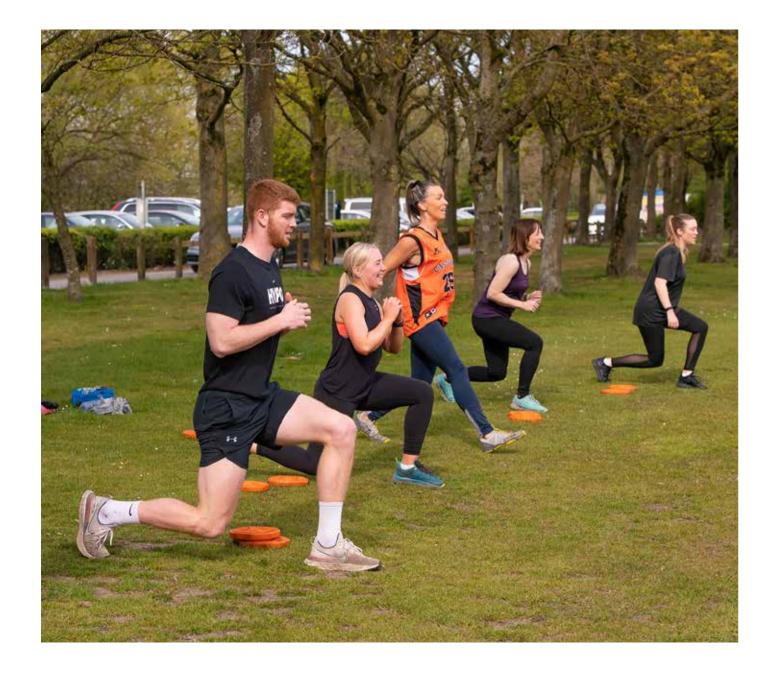
These improvements have, however, been compromised by austerity and the Covid-19 pandemic and are now compounded by the challenging economic climate. For the first time in decades, life expectancy is falling in England and falling faster in the least affluent communities. Our Joint Strategic Needs Assessment (JSNA) has been updated in response and reflects these challenges, as well as the asset-based actions that we have been taking to address them.

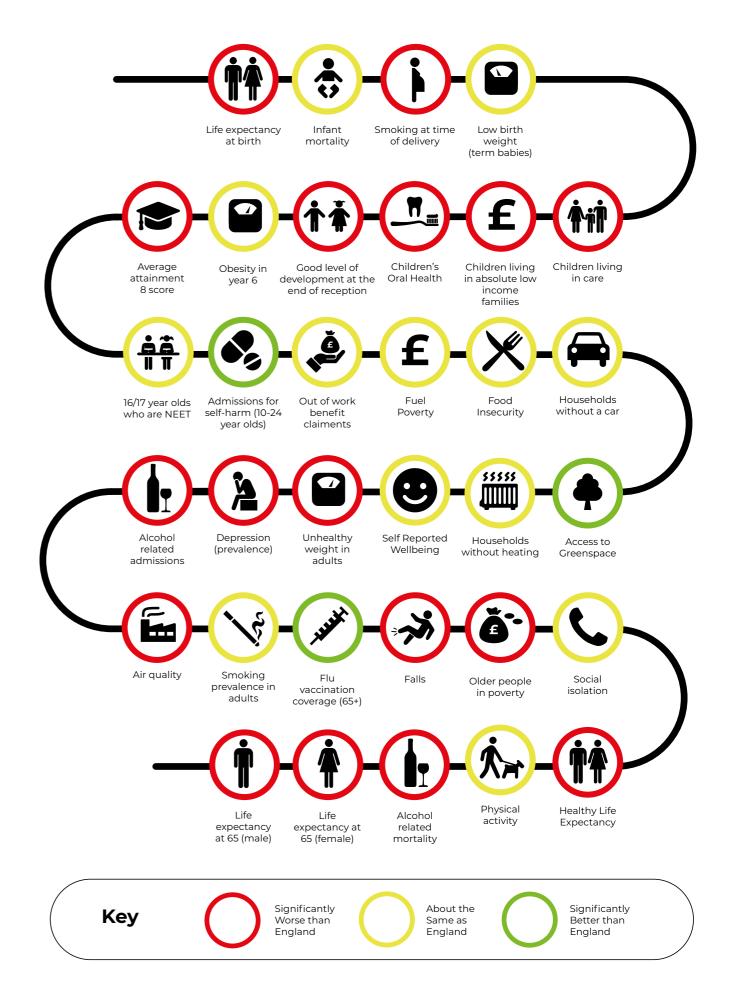
While we have a wide array of health-promoting assets within our borough, overall the health of the population is worse than the average in England. Our residents experience shorter lives and spend less time in good health than the national average. Within the borough, health outcomes also vary greatly across local communities. These health inequalities persist throughout the life course, across a range of health outcomes, and are predominantly associated with deprivation.

In 2023, the leading causes of death in Wigan Borough were dementia, lung cancers, pneumonia, heart diseases and heart attacks. Tobacco, diet, physical inactivity, and alcohol make up most of the preventable risks contributing to poor health and preventable deaths in the borough; all of these are symptomatic of broader socio-economic and environmental factors.

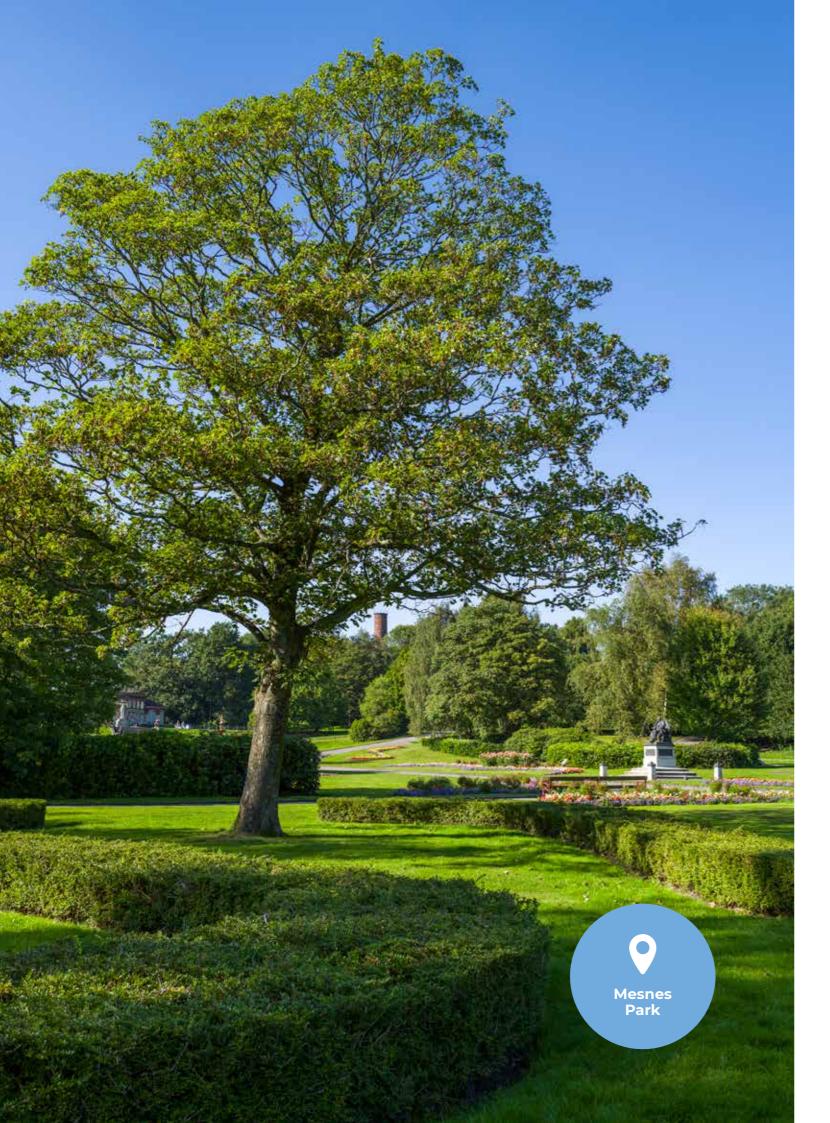
While an ageing population is a national issue, our population is already older than the average in England. These demographic challenges are evident throughout, and contribute to, the health outcomes reported in this profile. Efforts to improve health across the life course should focus on strengthening the environmental and social conditions that create good health, alongside the provision of high quality and accessible health and care services for all residents.

- Smoking prevalence has improved from 14.7% (in 2022) to 11.3% (in 2023).
- Hospital admissions due to falls have
 There has been a small increase in decreased (from 3,272 admissions per 100,000 residents age 65+ in 2021/22, to 2,645 admissions per 100,000 in 2022/23) - However, Wigan Borough no longer has the highest rate across Greater Manchester and North West for this measure.
- Mental wellbeing measures in Wigan have broadly worsened.
 - local volunteering and community participation.
 - Hospital admissions in children due to self-harm have decreased.





Produced by Wigan Council 's Joint Intelligence Unit (JIU)



Recommendations

This profile should continue to be reviewed and updated annually, bringing together information from the Council, NHS and other partners to reflect the important role that all organisations and sectors have in improving the health and wellbeing of our residents.

Progress with Unity recognises that it is our residents, businesses, and community groups that know our communities best. To enhance our understanding of our population's health and wellbeing, it is therefore essential that we gather insight from those who live and work here. It is recommended that an ongoing programme of community insightgathering is undertaken to provide qualitative intelligence to complement the quantitative data presented in this report, as well as guiding health-strengthening actions in our communities.

The use of largely publicly available data has led to some gaps in our understanding of the health assets and needs in the borough. Stronger partnership working to develop a more holistic approach to the JSNA, including the use of individual organisational intelligence to produce a collective assessment, will better inform these reports in future. In addition, partners will come together to develop more detailed topic-specific Health Needs Assessments.

This report identifies health inequalities as an ongoing, key local issue. Last year's JSNA recommended the production of a health needs

assessment focused on health inequalities. This will be completed in early 2025. The Health Needs Assessment will help to inform decision making and action to continue to tackle the root causes of these inequalities, supporting our Borough's missions to create fair opportunities for everyone and to support our communities to flourish.

Recognising the importance of starting well and the evolving picture of child health following the pandemic, last year's JSNA recommended the production of a Children and Young People's Health Needs Assessment. This is in development and will be published in early 2025. This Needs Assessment will provide recommendations for systemic action to strengthen and improve child health and reduce inequalities across the borough.

This profile identifies mental health and wellbeing as a key health issue in the borough. During 2025 a health needs assessment focused on population Mental Health and Wellbeing should be produced. This should draw on a range of information sources, including residents' own views, and make recommendations that will direct action across partners.

All organisations should use the profile as they develop plans and design services to review the changing population demographics, evolving health needs, and increasing demand for health and social care services in Wigan Borough.

Our Population

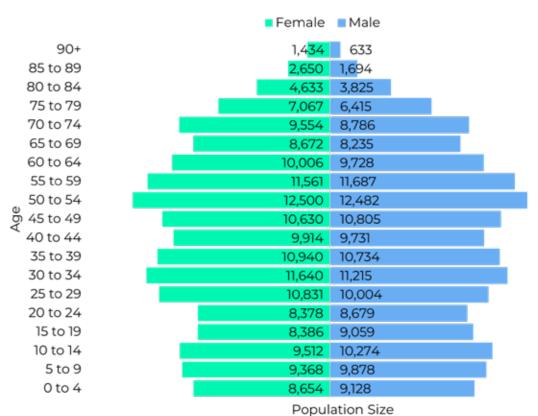
Understanding who lives in our borough is key to understanding the health of our residents. According to the 2021 Census, there are around 330,000 people living in Wigan Borough - 51% of the population is female and 49% male.⁵ Figure 2 illustrates the age composition of the population of Wigan Borough, which approximately mirrors that of England.



Demographics

- · 60,600 (18.4%) of the population of Wigan Borough are aged 15 years or younger
- · 205,100 (62.3%) are aged 16-64
- · 57,200 (17.4%) are aged 65-84
- · 6,400 (1.9%) are aged 85 and older

Figure 2: Wigan Borough population by age group and sex



Source: Census 2021

Over the years, Wigan has become more ethnically diverse, and this is increasing as the years go by. In 2021, 95% of people in Wigan identified their ethnic group as White, while 1.3% identified their ethnic group within the "Mixed or Multiple" category (compared with 0.9% the previous decade). Nearly 2% of

Wigan residents identified their ethnic group within the "Asian, Asian British or Asian Welsh" category, up from 1.1% in 2011. The percentage of people who identified their ethnic group within the "Black, Black British, Black Welsh, Caribbean or African" category increased from 0.5% in 2011 to 1.2% in 2021.

Ethnicity	2011	2021	% change
White	309,193	312,952	+1%
Asian, Asian British	3,519	5,826	+66%
Mixed/multiple ethnic groups	2,756	4,353	+58%
Black, Black British, Caribbean or African	1,678	3,907	+133%
Other ethnic group	703	2,292	+226%

^{5.} Census 2021: see https://www.wigan.gov.uk/Council/Data-Statistics/Census-2021.aspx

Health Outcomes

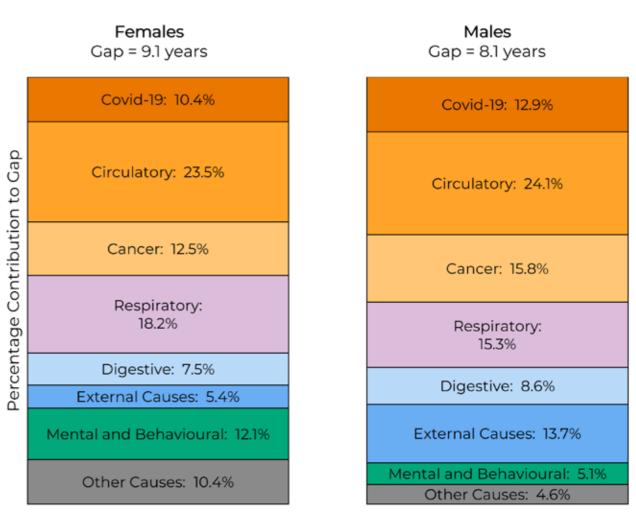


Life Expectancy

How long a person lives is dependent on a wide range of factors (often referred to as 'determinants'). Some of these are unchangeable (such as a person's genetics), some can be addressed at the individual level. but many more exist at a structural or societal level, and can be difficult for individuals to change on their own. How long an individual born in the borough can expect to live is the culmination of all of these factors combined; this is referred to as 'life expectancy'. In 2022, the average life expectancy at birth in Wigan was 80.7 years for females, and 77.1 years for males. Both of these are below the average in England: 83.2 for females and 79.3 years for males.6

Between the most deprived 20% and the least deprived 20% of the Wigan Borough population (see the section 'Deprivation' below for a detailed definition of this), there is a difference in life expectancy of 8.1 years for males and 9.1 years for females. The main drivers of this inequality are higher mortality rates due to circulatory diseases, cancers, and respiratory diseases in the most deprived populations (see Figure 3 below). Particularly for males, external causes (including alcohol and drug poisonings, and suicide) are also a significant factor in this inequality.⁷

Figure 3: Causes of the deprivation life expectancy gap, and their contribution



Source: OHID Segment Tool

^{6.} OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public- health-outcomes-framework

^{7.} https://analytics.phe.gov.uk/apps/segment-tool/

Mortality

The latest data (2023) shows that the leading causes of death were dementia, lung cancers, pneumonia, heart diseases and heart attacks. This is a change from the previous year when COVID-19 featured in the top causes of death.⁸ Death before the age of 75, referred to as 'preventable death', is the most preventable through better public health and acute healthcare. In under-75s, the leading causes of death are similar: Lung cancer, heart attacks, heart disease and pneumonia were the most prevalent causes of premature death in 2023.

Causes of premature death also vary within the borough, between males and females, and particularly between the most- and leastdeprived residents (see below for a detailed description of deprivation on page 33.). In males, generally similar causes of death are found in the most and least deprived areas, although Chronic Obstructive Pulmonary Disease (COPD) is a more significant cause of death in the most deprived, as shown in Figure 4 below.

In females, more variation is seen between the most- and least-deprived residents, with heart disease being a more prevalent cause of premature death in females in the most deprived areas. Breast cancer is the most likely cause of early death in the least deprived, while being outside the top five causes for the most deprived (see Figure 4 below).

Figure 4: Leading causes of death in residents aged under 75 years (2019 - 2023)

Fem	nales	Males		
Most Deprived	Least Deprived	Most Deprived	Least Deprived	
Lung Cancer	Breast Cancer	Chronic Ischaemic Heart Disease	Covid-19	
Chronic Obstructive Pulmonary Disease	Lung Cancer	Lung Cancer	Chronic Ischaemic Heart Disease	
Covid-19	Covid-19	Acute Myocardial Infarction	Lung Cancer	
Alcoholic Liver Disease	Chronic Obstructive Pulmonary Disease	Covid-19	Acute Myocardial Infarction	
Chronic Ischaemic Heart Disease	Alcoholic Liver Disease	Chronic Obstructive Pulmonary Disease	Alcoholic Liver Disease	

Source: NHS Digital Primary Care Mortality Database

Infant Mortality

The causes of infant mortality (children dying in the first year of life) reflect the causes of life-long ill health; infant mortality is therefore often used as an indicator of the effectiveness of health and healthcare in an area.¹⁰

Between 2020 and 2022, Wigan Borough's infant mortality rate was 3.7 deaths for every 1,000 live births.¹¹ This was slightly lower than the average rate in England (3.9 deaths per 1,000 live births) and significantly lower than the rate of the North West (4.4 per 1,000).

Healthy Life Expectancy



As well as how long residents of Wigan Borough live, we want to understand how healthy they feel during their lifetime. In addition to living shorter lives compared to the average in England, people born in Wigan Borough will spend more of their life in poor health. In the three-year period 2018 to 2020, females born in Wigan Borough could expect to live for just over 61 years in generally good health, and males for just over 59 years;

this means that Wigan Borough residents generally spend much of their later life in poor health, potentially beginning before retirement.¹²

^{8.} Civil Registrations Data, NHS England

^{9.} https://digital.nhs.uk/services/primary-care-mortality-database

^{10.} See: https://ukdataservice.ac.uk/case-study/measuring-child-and-infant-mortality/

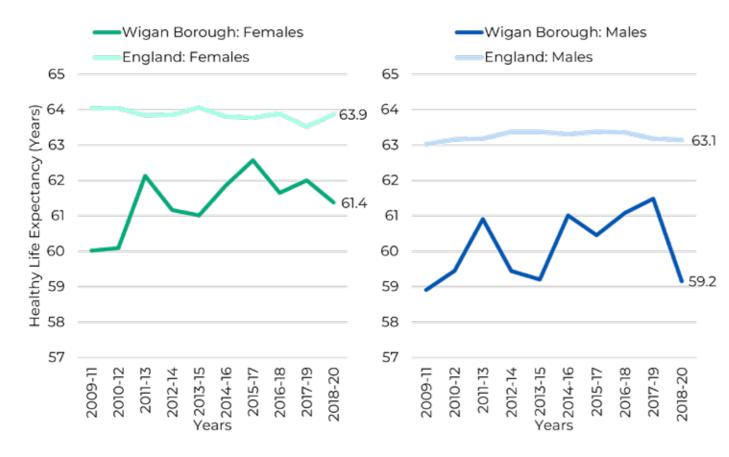
^{11.} OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public-health- outcomes-framework

^{12.} OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public- health-outcomes-framework

Although healthy life expectancy for both males and females in Wigan Borough had historically been significantly below England, leading up to the period 2017 to 2019 the borough had almost caught up to the England average. It is likely that the unequal effect of the pandemic across the country contributed to the gap widening in the period 2018 to 2020 (as illustrated in Figure 5 below);

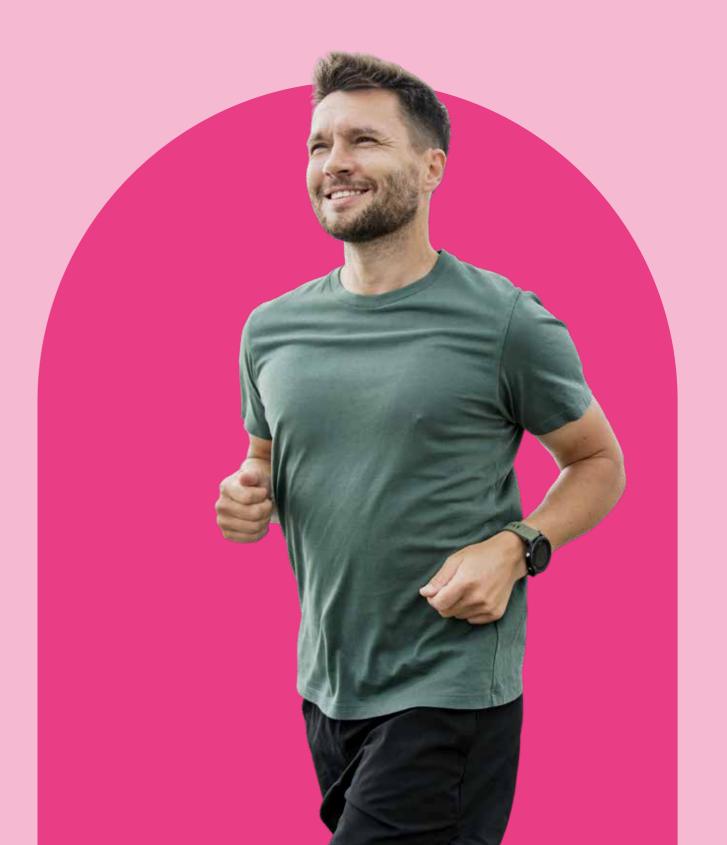
data for the post-pandemic years has not yet been released to allow us to understand if the gap has begun to close again. In the period 2018 to 2020, healthy life expectancy in Wigan Borough was similar to Greater Manchester (60.9 years for Females, 61.4 years for males), and below the North West (62.4 and 61.5) and England averages (63.9 and 63.1).

Figure 5: Healthy life expectancy (years expected to be lived in good health)



Source: OHID Fingertips Public Health Outcomes Framework

Protective Factors and Preventable Risks

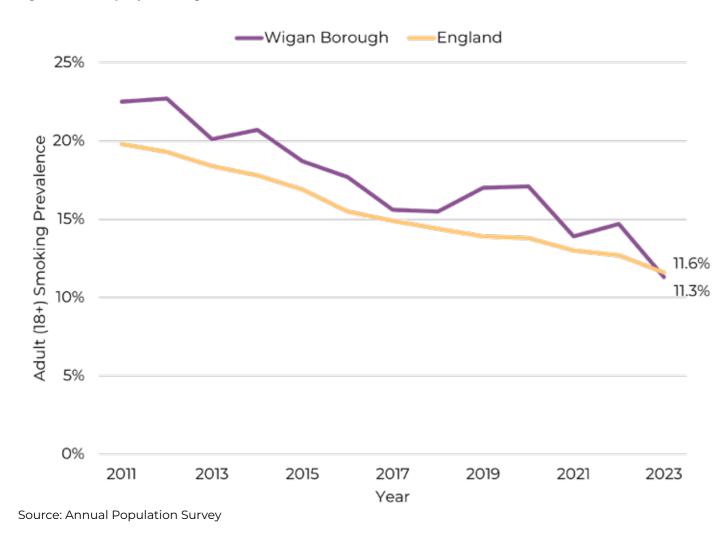


Smoking

Smoking is the leading cause of preventable ill health and premature mortality in the UK.¹³ Although there is still much work to do, helping our population to quit smoking has been a success story in Wigan Borough. In 2011, just over one in five adults (22.5%)

smoked, but by 2023 this figure has halved to 11.3%.14 Smoking prevalence in the borough is slightly (but not significantly) below the averages in Greater Manchester (12.5%), the North West (11.8%), and England (11.6%, see Figure 6 below).

Figure 6: Adult (18+) Smoking Prevalence



Regardless of the overall success of stop smoking efforts in the borough, inequalities still persist within our population. Smoking prevalence is highest in those in unemployment (29.0%) and routine and manual workers (26.2%) compared to other occupation types.

Case Study:

Health Checks at the Heinz factory



Employees in manual work experience greater barriers to accessing regular health check-ups, meaning that they are at higher risk of developing serious health issues.

Working in partnership, Wigan Council's Deal for Business team, the Be Well Health Improvement service and our NHS health checks provider (Health First CIC) are delivering health checks in workplaces to offer everyone an opportunity to get a check-up.

On a visit to the Heinz factory in Wigan, 112 workers received a health check in

one day, with employees who needed further support guided to the right service. Because some members of staff had particularly expressed interest in getting help to quit smoking, our Be Well Stop Smoking Service later returned to the factory to provide specialised sessions.

The partnership is continuing to deliver workplace health checks in businesses across the borough, ultimately increasing access to preventative health across our population and putting more people in control of their own health and wellbeing.

^{13.} https://www.gov.uk/government/publications/smoking-and-tobacco-applying-all-our-health

^{14.} OHID Fingertips: Local Tobacco Control Profiles, see https://fingertips.phe.org.uk/profile/tobacco-control

Alcohol

Alcohol is a direct or indirect cause of over 200 different illnesses, including cancer, cardiovascular conditions, depression and liver conditions. Alcohol consumption is a major factor causing ill health and early death across England. 15 The hospital burden from alcohol in Wigan Borough is similar the rest of the country; in 2022/23 there were 491 admissions for alcohol-related conditions for every 100,000 adults in the population, compared to 475 per 100,000 adults in England, 442 in Greater Manchester, and 475 in the North West. The rate of admissions was higher in males than females. Compared to statistically similar local authorities (NHS England neighbours), Wigan Borough is roughly average for alcohol-related hospital

admissions (5th out of 16 similar areas for males, and 4th for females). This could suggest wider structural reasons for these admissions, which affect all areas similar to Wigan Borough.

In the period 2019 to 2020, an estimated 4600 adults were alcohol dependent in Wigan Borough, representing around 1.8% of the adult population. The environment around where residents live contributes to this issue; there are 5.1 premises licensed to serve alcohol per square kilometre in the borough, significantly higher than the 1.3 per square kilometre average across England. Efforts to tackle alcohol dependence in the borough should focus on these structural factors.

Case Study:

Recovery from Addiction - Jake's Story



Increasing debt led to Wigan Borough resident Jake taking drugs to cope with his stress, feeling his other options had run out.

However, becoming addicted to cocaine worsened his financial pressures, and his own shame caused him to feel hopeless and isolate himself from others.

At a crisis point, Jake reached out to the Borough based With You service, and with the support of his caseworker he was able to take his first steps into recovery. Jake and his caseworker together created a tailored plan which allowed him to recover from his addiction, and rebuild his finances and mental resilience.

Jake went on to become a caseworker for With You, mentoring other residents of the borough and supporting them on their own personal journeys recovering from addiction.

- 15. https://www.gov.uk/government/publications/alcohol-applying-all-our-health
- 16. https://www.gov.uk/government/publications/alcohol-dependence-prevalence-in-england
- 17. OHID Fingertips: Local Alcohol Profile, see: https://fingertips.phe.org.uk/profile/local-alcohol-profiles

Mental Wellbeing

Mental wellbeing is generally understood as a person's ability to feel good and function well; good mental wellbeing is key to good overall health. In the Greater Manchester Residents Survey,¹⁸ the majority of residents of Wigan Borough report generally good mental wellbeing:

 64% of Wigan respondents report being satisfied with their life

- 64% of Wigan respondents felt that things they did in their life were worthwhile
- 78% of Wigan respondents reported feeling generally happy

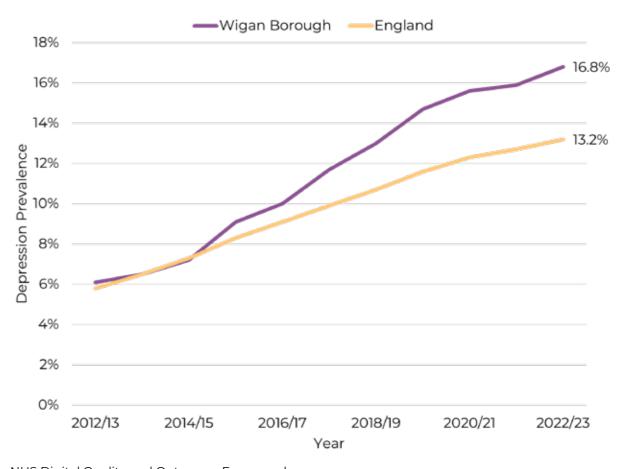
While these findings are encouraging, they identify that a minority of residents experience poor mental wellbeing. In addition, some of our residents experience mental health symptoms which more severely affect their day-to-day life.

Anxiety

Around four in ten residents of the borough (42%) reported feeling high anxiety, and another 16% reported medium anxiety, in the Greater Manchester Residents Survey.¹⁹ This was higher than the average in Greater Manchester (38% high anxiety, 18% medium

anxiety). High anxiety was most prevalent in residents aged 16 to 24 (47%) and 25 to 44 (55%); this prevalence in people aged 25 to 44 is particularly noteworthy as it differs from the Greater Manchester trend, where anxiety is usually highest in the youngest residents.

Figure 7: Depression Prevalence (Adults aged 18+)



Source: NHS Digital Quality and Outcomes Framework

- 18. Greater Manchester Residents Survey, September 2023 to September 2024
- 19. Greater Manchester Residents Survey, September 2023 to September 2024
- 20. Quality and Outcomes Framework (QOF), NHS Digital

Depression

According to GP data, around one in six people in Wigan Borough are diagnosed as living with depression. This prevalence has increased from being broadly similar to the England average in 2012/13, to significantly higher in 2022/23,20 see Figure 7 on page 23. From April 2023 – March 2024 (inclusive),

there were 5,800 new cases of depression recorded on GP registers in the borough, which is equivalent to 21 new cases of depression per 1000 people in one year. It should be noted that people who have not contacted their GP about depression will not be included here, so the statistics in this section are likely to be underestimates of the true scale of the issue.

Suicide and Self-Harm

Suicide is a serious public health issue which requires action across all levels of society to address. Nationally, suicide rates have been increasing since 2016 in all age groups, and particularly in people aged 15 to 44. Between 2021 and 2023, the suicide rate in Wigan Borough was 15.7 deaths per 100,000 people, significantly higher than the England average rate (10.7 deaths per 100,000 people) and slightly higher than the North West average (13.3 deaths per 100,000 people).²¹

The rate of emergency hospital admissions for intentional self-harm in 2022/23 was

100.9 admissions per 100,000 people, similar to the Greater Manchester average (110.8 per 100,000) and significantly lower than the North West and England averages (139.3 and 126.3 per 100,000 respectively).²²

There is only limited data available to understand mental wellbeing in the borough, and it is likely that many who struggle with their mental health are hidden from existing data sources.

There is a need to undertake further exploration of the enablers and barriers to good mental health and wellbeing in the borough, and this should draw on a wider range of information sources, including residents' own views.

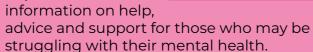
Case Study:

Month of Hope

Bridging World Suicide Prevention Day (10th September) and World Mental Health Day (10th October), Month of Hope is an annual opportunity to raise awareness about suicide prevention, encourage more conversations about mental health and share positive messages of hope.

Through a wide-scale campaign including newsletters and social media channels, Wigan Council shared stories of hope from people with lived experience. Residents were directed to free suicide prevention training, as well as local voluntary and community organisations who provide hope to people in our local communities. 1000 crocheted flowers created by

community groups
(One House Aspull
and MissPlaces)
were distributed
with messages of
hope and a link to
information on help,



The team are now building on the successful and widespread engagement with Month of Hope, developing new resources with communities, and redeveloping our online offer to highlight more local stories of hope.



^{22.} HID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public-health- outcomes-framework

Overweight and Obesity

Living with overweight or obesity is associated with reduced life expectancy and a range of health conditions including type 2 diabetes, cardiovascular disease, liver and respiratory disease and cancer.²³ Across England, the availability of unhealthy food and drink, as well as the structural environment we live and work in, promotes weight gain and limits our ability to lose weight; this is referred to as the 'obesogenic environment'. In Wigan Borough

around seven in ten adults (70.8%) are living with overweight or obesity, significantly higher than the averages in Greater Manchester (65.9%), North West (66.5%) and England (64.0%).²⁴ This figure has slightly increased over the last decade in the borough, mirroring the national trend (see Figure 8).

Figure 8 Percentage of adults (18+) classified as living with overweight or obesity



Source: OHID Fingertips

 $^{23. \} https://www.gov.uk/government/statistics/update-to-the-obesity-profile-on-fingertips/obesity-profile-short-statistical-commentary-may-2024$

^{24.} OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public- health-outcomes-framework

Physical Activity

Being physically active can lower the risk of overweight and obesity, which in turn reduces the risk of cardiovascular disease, coronary heart disease and having a stroke. Adult physical activity has recovered slightly since the Covid-19 pandemic, with over three in

four adults meeting government guidelines for physical activity each week. Around one in four adults (23.8%) in Wigan Borough are generally physically inactive, similar to the averages in Greater Manchester (25.4%), the North West (24.2%) and England (22.6%).²⁵



Falls

Falls are the largest cause of emergency hospital admissions for older people, and a fall can have a significant impact on long term health outcomes for an individual person.²⁶ There were 2,645 hospital admissions due to falls per 100,000 people aged 65 or over in 2022/23, significantly worse than the averages in Greater Manchester (2,280 admissions per 100,000 residents), the North West (2,139 per 100,000) and England (1,933 per 100,000).²⁷

Importantly, these values are adjusted (standardised) to remove the effect of age, meaning that hospital admissions due to falls are more of a problem in Wigan Borough than these other areas even after taking account of our older population. However, Wigan Borough no longer has the highest rate across Greater Manchester and North West for this measure.

Case Study:

Preventing Falls with Be Well's Strength and Balance Training Programme

Wigan Borough has one of the highest rates of hospital admissions due to falls in England. With an increasingly ageing population, preventing falls is essential to reduce harm and injury to residents and prevent hospital attendance.

Wigan Council's Be Well health and wellbeing service delivers a programme of strength and balance training for older residents of Wigan Borough. 25 strength and balance sessions are delivered each week, in various locations across the borough, and Be Well also provide education and resources to help older people exercise at home. Residents are taught what to do if they fall, and practice how to get off the floor safely, to build confidence and ultimately help people age better and with more independence.

Evaluation of the programme so far has found that after taking the strength and balance programme, participants were far less likely to experience a fall, and injuries from falling decreased dramatically.

Consequently, participants required fewer ambulance attendances, and spent far less time in hospital. Be Well are now exploring opportunities to expand the programme and ultimately support more people in the borough to age well.



^{25.} OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public- health-outcomes-framework

^{26.} https://www.gov.uk/government/publications/falls-applying-all-our-health/

^{27.} OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public- health-outcomes-framework

Child Health

The first 1001 days of a person's life are the most critical to lifelong health and wellbeing; a healthy adulthood is built from a foundation of strong health and wellbeing assets in the earliest stages in life. Unfortunately, children and young people in Wigan Borough experience relatively poor

health outcomes compared to the average in the country. A separate Children and Young People's Health Needs Assessment is currently being conducted which explores more deeply the breadth of factors which contribute to child health; this will be published in early 2025.



Oral Health

Poor oral health (the state of the mouth, teeth and facial structure) affects nearly 3.5 billion people worldwide.²⁸ In Wigan Borough, almost a third (32.6%) of five-year-olds had visibly obvious dental decay in 2021/22, considerably worse than the average in England (23.7%). If not addressed early, poor oral health can lead to a hospital admission to have teeth extracted under general anaesthetic. Between 2020/21 and 2022/23, the rate of emergency hospital admissions for tooth

decay in Wigan Borough was 347.1 admissions per 100,000 children aged five and under. This was significantly higher than the averages in Greater Manchester (273.2 per 100,000), the North West (271.6 per 100,000) and England (178.8 per 100,000). Compared to other Local Authority areas with similar characteristics (NHS England Nearest Statistical Neighbours), Wigan Borough was roughly ranked in the middle for this measure (eighth of sixteen similar areas).²⁹

Case Study:

Family Hub Oral Health Summer Sessions



Poor oral health affects many children in Wigan Borough – more of our children are living with decayed or missing teeth than the national average. To address this issue, Wigan Council's Be Well Oral Health team reached out to family hubs across the borough, holding eight sessions across summer 2024. Children and families were able to participate in fun games, learn how to make healthy snacks, while also learning key oral health messages.

Using a survey before and after the session, the Be Well Oral Health team found that parents scored their oral health knowledge 65% higher after the sessions, with the largest gains in our most deprived areas. Participants improved their knowledge of toothbrushing technique, and were more likely to sign their child up to a dentist. The team now plans to expand the programme to involve more partners across the borough, as well as reaching out to more sites for extended periods to deliver this essential intervention.

^{28.} https://www.who.int/news-room/fact-sheets/detail/oral-health

^{29.} OHID Fingertips: Child and maternal health profile, see: https://fingertips.phe.org.uk/profile/child-health-profiles

Overweight and Obesity

In 2022/23, 24.9% children in Reception (4-5 years old) were living with overweight or obesity, which is significantly worse than the England average (21.3%), and slightly worse than the North West (23.1%) and Greater Manchester averages (22.2%). This figure is broadly unchanged over the past ten years.

In the same period, 37.7% of Year 6 students (10-11 years old) were recorded as living with overweight and obesity, which was not significantly different to England (36.6%), the North West (38.3%) and Greater Manchester averages (38.8%).³⁰ However this represents a significant increase over the past ten years.

Physical Activity

30

Fewer than one in two children and young people (44.6%) in Wigan Borough meet the Chief Medical Officer's recommendation of 60 minutes per day of moderate exercise, similar to average in the North West (45.1%) and England (47.0%). Three in ten (32.7%) are active for less than 30 minutes a day.³¹



Case Study:

Connecting with Nature at Pennington Flash



As part of National Nature Playday 2024, Wigan Council's Be Well health and wellbeing service organised a play day at Pennington Flash on Wednesday 7th August. This free event invited families from the borough to take part in woodland den building, archery, and arts and crafts, as well as enjoying the nature reserve's inclusive adventure playground.

Be Well took a targeted approach to promoting the event, including free coach travel from seven of the borough's Start Well centres and Family Hubs as part of the Holiday Activities and Food programme. Engaging families from across the borough, and ensuring access for all, means that more children have the opportunity to be physically active, socialise, and connect with nature in their local area.

Mental Wellbeing

Overall, children in Wigan Borough scored their psychological wellbeing similar to the average across Greater Manchester, in the BeeWell survey, when adjusted for demographic and social factors across the region. This suggests that assets in the borough may be helping to improve the resilience of children's wellbeing, ultimately keeping children happier and healthier. There was some inequality within the borough, with the score in Leigh neighbourhood the lowest, however more detailed insight into children's

mental wellbeing is required particularly at a more local level.

The rate of hospital admission for self-harm in children and young people (aged 10-24) is lower in Wigan Borough than the England average. In 2022/23, there were 223.4 admissions per 100,000 people aged 10-24 in the borough, compared to averages of 251.7 per 100,000 in Greater Manchester, 346.6 per 100,000 in the North West, and 319.0 per 100,000 in England.³³

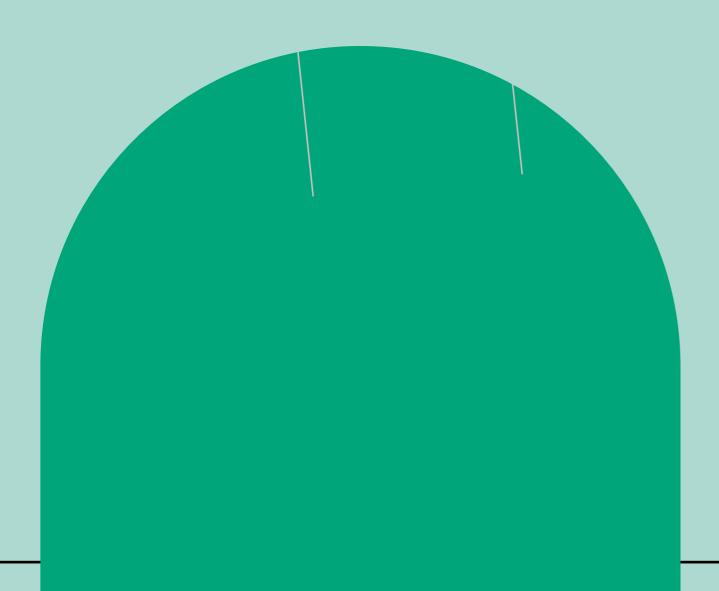
^{30.} OHID Fingertips: Physical Activity profile, see: https://fingertips.phe.org.uk/profile/physical-activity 31. https://www.sportengland.org/research-and-data/data/active-lives

^{32.} Bee Well Survey, using context-adjusted scores. See: https://uomseed.com/beewell-neighbourhoods/2023/ 33. OHID Fingertips: Child and maternal health profile, see: https://fingertips.phe.org.uk/profile/child-health-profiles

Building Blocks of Good Health

Almost every aspect of our lives, and the social and material environment around us, impacts our health and ultimately how long and well we live. Some of the most important building

blocks for good health in Wigan Borough, also referred to as the wider determinants of health, are detailed in this section.



Money and Resources

Access to Health Assets

Our health is dependent on being able to access the assets to build healthy and productive lives. A lack of these healthbuilding assets is generally referred to as being 'deprived'. In England, the Index of Multiple Deprivation is used to score deprivation across the country, based on the areas considered among the most deprived availability of assets in several key 'domains' of life. Overall, Wigan Borough is the 75th

most deprived local authority in the country (out of 317), but deprivation is also very unequal within the borough (see Figure 9 below).

As with many local authorities in the North of England, a disproportionate number of residents of Wigan Borough are living in in England (see Figure 10).34

Figure 9: Deprivation by small area (LSOA) in Wigan Borough

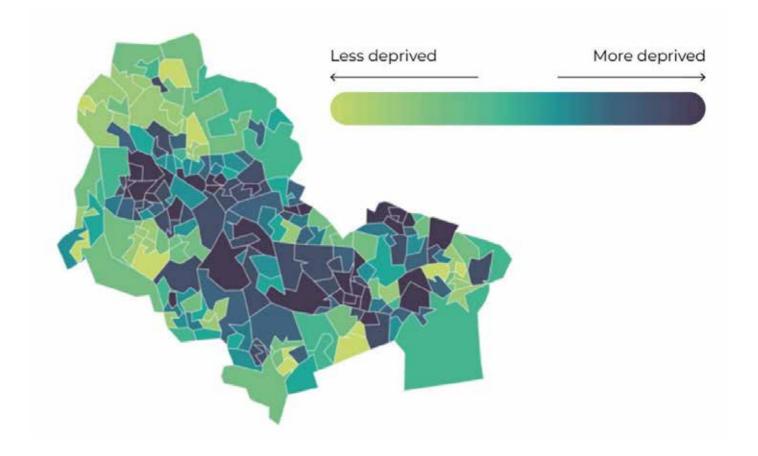
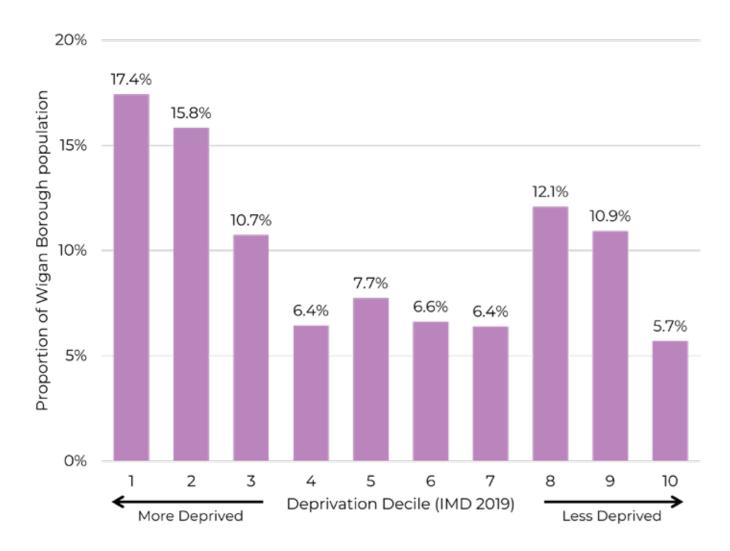


Figure 10: Population living within in each National Deprivation Decile



Source: English Indices of Deprivation 2019

Debt

Financial resources are a key asset to building health, and debt represents the lack of this advantage. To understand how many people might be at risk of falling into debt in a financial emergency, the Greater Manchester Residents Survey asked respondents if they would be able to afford an unexpected expense of £850.

Between September 2023 and May 2024, in Wigan Borough just over a third of

respondents (36%) said they would not be able to afford this expense.

Being in debt can reduce mental wellbeing, as well as having direct impacts on physical health. Almost three in ten residents of Wigan Borough who are already in debt, are struggling with managing their current level of debt (28%). 45% of residents reported difficulty affording their energy costs, and 10% said they had skipped eating for a whole day because they didn't have enough money for food.

Case Study:

Helping residents access financial support



In a cost-of-living crisis, many residents are still unaware of the financial support that they are rightly entitled to. Wigan Council's Here for You campaign is working to help tackle this problem. Staff from across the council work together to identify opportunities to help residents address cost-of-living issues, and community events across the borough support residents to identify and claim benefits they are eligible for.

More than £4.6 million of previously unclaimed financial support has now been accessed by local people, including over 370 residents claiming Attendance Allowance and 160 receiving Pension Credit payments. Building on these successes, the campaign is continuing to host sessions across the borough, helping more residents into financial stability.

^{35.} See: https://www.health.org.uk/publications/long-reads/debt-and-health

^{36.} Greater Manchester Residents Survey, May 2023 to November 2023

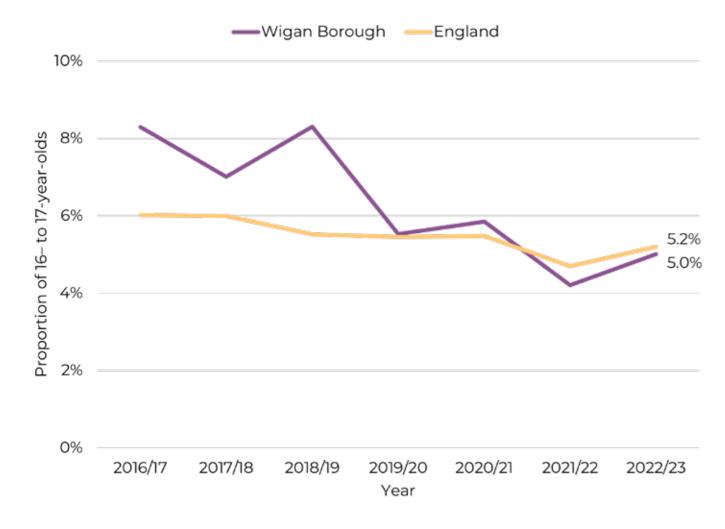
Education and Skills

Education is an important building block for good health. A good education provides the skills and knowledge to secure good work and participate in society, and also equips the individual with the ability to understand and advocate for their own health.37

In 2022/23, 63.4% of children in Wigan Borough had achieved a good level of development by the end of Reception; this was roughly the same as the average in Greater Manchester and the North West (63.3% and 64.3% respectively), although significantly lower than the England average (67.2%).38 Compared to Local Authority areas with similar characteristics (NHS England Statistical Neighbours), Wigan Borough had the third-worst achievement of good level of development out of sixteen similar areas.

Around one in twenty 16 to 17-year-olds in Wigan Borough (5.0%) were not in education, employment, or training as of 2022/23. This was broadly similar to the Greater Manchester (5.7%), North West (5.3%) and England (5.2%) averages, and represented a significant improvement since 2016/17 (see Figure 11 below).39

Figure 11: Proportion of 16- to 17-year-olds not in education, employment or training



Source: Department of Education

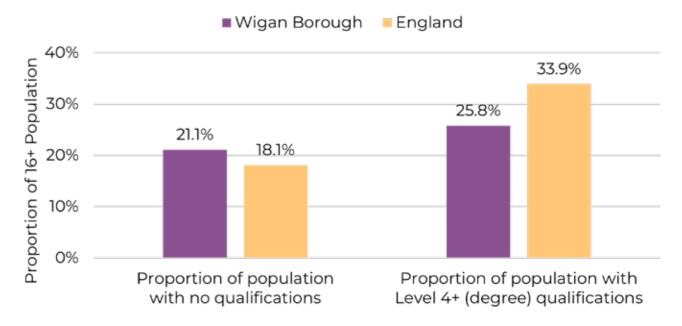


Around 56,000 adults (21.1%) aged 16+ in Wigan Borough have no qualifications, which is slightly higher than the Greater Manchester (20.0%), North West (19.5%) and England (18.1%) averages. Additionally, 25.8% of adults aged 16+ in Wigan Borough have at least a 'Level 4' qualification (a university degree or

equivalent qualification), which is lower than the 33.9% average in England (see Figure 12). Notably, 7.1% of Wigan Borough residents hold an apprenticeship, the highest proportion of Greater Manchester local authorities, and much higher than the England average (5.3%).40

37

Figure 12: Population Age 16+ by highest level of qualification



Source: Census 2021

^{37.} See: https://www.health.org.uk/publications/long-reads/lifelong-learning-and-levelling-up-building-blocks-for-good-health

^{38.} OHID Fingertips: Child and maternal health profile, see: https://fingertips.phe.org.uk/profile/child-health-profiles

^{39.} OHID Fingertips: Child and maternal health profile, see: https://fingertips.phe.org.uk/profile/child-health-profiles

^{40.} OHID Fingertips: Child and maternal health profile, see: https://fingertips.phe.org.uk/profile/child-health-profiles

Good Work

Being employed in 'good work' which is fulfilling for an employee, while providing good pay, working conditions, progression, and work life balance, for example - is a valuable health-promoting asset. Individuals who work in good jobs are more likely to stay healthy, and businesses which maintain good workplaces are more likely to retain their staff.41 According to the 2021 Census, 36.9% of adults in the borough are in full time employment, with 60.6% of people economically active in some form. The most common industry types were Wholesale & Retail, and Health & Social Care. It should be noted that this Census was conducted in March 2021 during the Covid-19 pandemic

and lockdown, a time of uncertainty and rapid change in employment.⁴²

A clear majority of working residents of Wigan Borough report having good job satisfaction⁴³:

- Seven in ten (69%) were satisfied with their job.
- Six in ten (63%) were satisfied with their pay.
- Eight in ten (80%) were satisfied with their working hours.
- Only one in six (16%) feared they might lose their job in the next 12 months.

Access to Nature

Access to good quality green space is a protective factor for both mental and physical health.⁴⁴ Wigan Borough is the nature capital of Greater Manchester, with three nature reserves and 738 hectares of post-industrial shallow open water bodies and associated wetland habitats in the Wigan and Leigh Flashes. According to the Greater Manchester Residents Survey, almost three quarters (73%) of Wigan Borough were happy with the parks and green spaces in their local area, with only 11% dissatisfied.⁴⁵ People living in more deprived areas, minority ethnic groups and younger people are more likely to live in areas with less access to green space.⁴⁶



- 41. See; https://www.local.gov.uk/topics/employment-and-skills/good-work-project
- 42. Census 2021: see https://www.wigan.gov.uk/Council/Data-Statistics/Census-2021.aspx
- 43. Greater Manchester Residents Survey, June 2023 to July 2023
- 44. See: https://www.mentalhealth.org.uk/our-work/research/nature-how-connecting-nature-benefits-our-mental-health
- 45. Greater Manchester Residents Survey, September 2023 to September 2024
- 46. Health Foundation 2024

Good Homes

Living in a permanent, safe, and warm home is fundamental for health; warm homes are associated with better general health and a reduced risk of illness in people of all ages.⁴⁷ In Wigan Borough, one in eight people (13.3%) are estimated to be living in 'fuel poverty', where energy costs push the household below the poverty line; this was similar to the national average (13.1%) and slightly below the North West average (14.1%).⁴⁸ In addition, around 1% of houses lack any form of central

heating (slightly better than the 1.5% average in England).⁴⁹

Housing pressure is a longstanding national issue which affects Wigan Borough: around 1.0% of households in Wigan Borough are classified as homeless of and a further 0.7% are threatened with homelessness; both of these are higher than the national average (0.7% and 0.6%, respectively).

Case Study:

Building Homes and Community Wealth in Wigan Borough



Developers and builders in Wigan Borough have created apprenticeships, donated to local charities and organisations, and invested in our communities, while building much-needed homes in partnership with Wigan Council. This extra value has all been created as part of the council's Community Wealth Building focus, which prioritises developers and builders who commit to

being a real part of the community while they are on site.

In 2023/24, more than 20 apprentices were employed by developers contracted by the council, and £29,000 of donations and donations in kind were made to local charities, making council money go further and do more for the local area. By embedding community wealth building into contracts and public spending, Wigan Council is ensuring that local developers who believe in investing in local communities are commissioned to undertake work. This approach was also taken in the Haigh Hall redevelopment, where the developers employed apprentices, offered work experience, and hired local subcontractors.

Wigan Council is continuing to use this approach, to deliver much-needed affordable homes in the borough while ensuring local communities benefit and thrive from this investment.

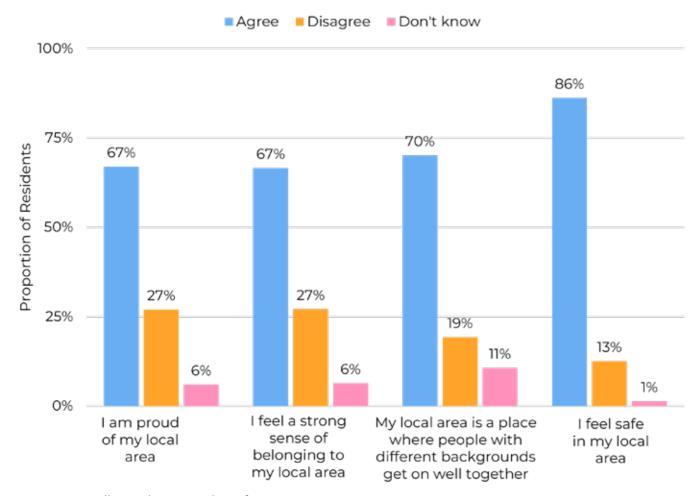
- 47. See: https://healthequals.org.uk/data_insights/how-do-homes-shape-our-health/
- 48. OHID Fingertips: Public Health Outcomes Framework, see: https://fingertips.phe.org.uk/profile/public-health-outcomes-framework
- 49. Census 2021: see https://www.wigan.gov.uk/Council/Data-Statistics/Census-2021.aspx
- 50. As defined by Department for Levelling Up, Housing & Communities
- 51. https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness

Family, Friends and Communities

The community we grow up and live in greatly influences how healthy we are. Over two in three Wigan Borough residents are proud or very proud of their local area, with seven in ten reporting their local area is a place where people of different backgrounds

get along well,⁵² although these are lower than the Greater Manchester average. The overwhelming majority also feel safe in their local area, though around one in eight feel at least fairly unsafe (see Figure 13).

Figure 13: Feelings about Community and Local Area



Source: GMCA Police and Community Safety Survey

Wigan Borough residents generally have good access to the health-promoting asset of social connection; three in four residents reported that they had someone to call on for company or to socialise, although this does suggest a significant minority may be experiencing loneliness.⁵³ However, four in five residents of Wigan Borough reported that if they needed help, there are people who would be there for them.

Volunteering has social and wellbeing benefits to the individual, as well as benefits to their local area. There are an estimated 1500 voluntary, community, faith and social enterprise organisations within Wigan Borough. However, only 27% of residents reported volunteering for a club, group or organisation in the last year, the lowest proportion among the Greater Manchester boroughs. This is an improvement from last year however is significantly below the Greater Manchester average (32%).54

Access to high-quality health services



^{52.} GMCA Police and Community Safety Survey, June-July 2023

^{53.} GMCA Police and Community Safety Survey, June-July 2023

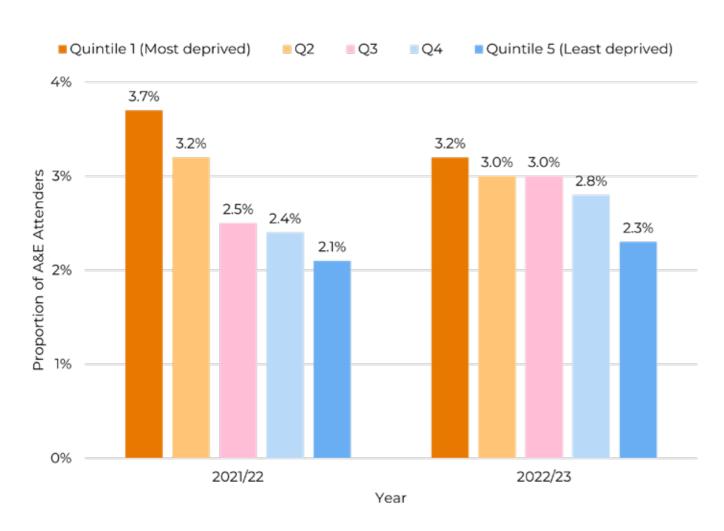
^{54.} Greater Manchester Residents Survey, September 2023 to May 2024

NHS Attendances

Wrightington, Wigan and Leigh (WWL) NHS Foundation Trust investigated the effect of deprivation on Accident and Emergency (A&E) attendance, and on 'did not attend' rates (the proportion of appointments where the patient does not turn up).

This analysis highlighted inequality between the most- and least-deprived residents for both frequent Accident and Emergency (A&E) attenders⁵⁵ (see Figure 14) and 'did-notattend' rates (see Figure 15).

Figure 14: Proportion of A&E Attenders defined as Frequent, by Deprivation Quintile



Source: Wrightington, Wigan and Leigh NHS Foundation Trust

Figure 15: 'Did-not-attend' rate by deprivation quintile



Source: Wrightington, Wigan and Leigh NHS Foundation Trust

These patterns are mirrored nationally, with deprivation having a significant impact on both the likelihood of not attending an appointment, as well as being a frequent attender of A&E. More work is required to understand why this is happening and to make sure people are getting the support they need in the right place at the right time.

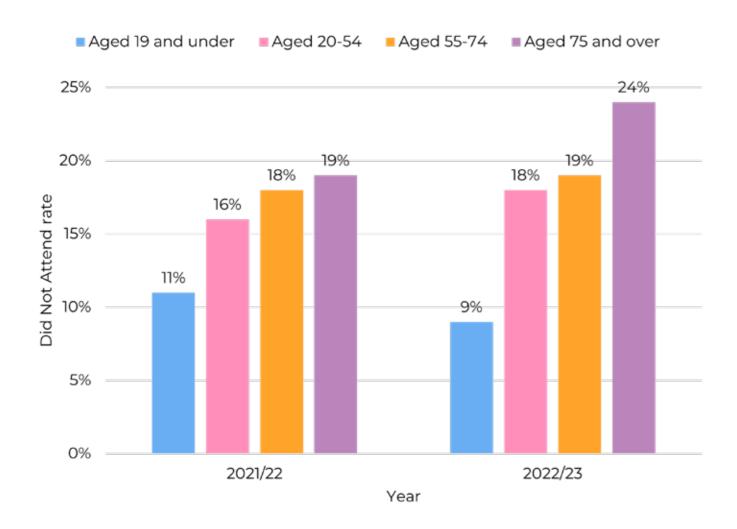
^{55.} Defined as a person who attends A&E five or more times within one year, from Royal College of Emergency Medicine

Emergency Readmissions

is measured to identify issues with patient discharge and recovery after a hospital stay. Analysis by Wrightington, Wigan and Leigh NHS Foundation Trust of re-admissions within 30 days did not identify any inequality between deprivation quintiles. There was, however, significant variation between age groups, with older residents being more likely

The rate of emergency readmission to hospital to be readmitted (see Figure 16); this pattern is also seen nationally. This suggests that older people in the borough may require additional support after discharge to recover and regain their independence, to ultimately prevent a readmission to hospital.

Figure 16: Readmission rate within 30 days for emergency inpatients, by age band



Source: Wrightington, Wigan and Leigh NHS Foundation Trust

More data is required to assess access to other health and care services in the borough.

Notes

