

Sefton Health and Wellbeing Survey Intelligence

January 2014

Background

In 2012, two surveys were commissioned to examine different aspects of health and wellbeing in Sefton. Firstly, The Merseyside Lifestyle Survey (2012) was jointly commissioned with NHS Halton & St Helens, NHS Knowsley, and Liverpool Primary Care Trust to explore key health behaviours and attitudes across Merseyside and within specific population groups. Whilst each area has undertaken lifestyle surveys in the past, this is the first time a shared methodology has been used across Merseyside. The survey establishes a method which can be reproduced in the future to monitor health and lifestyle within and across the local authority areas. Secondly, The Mental Wellbeing Survey (2012/13) was commissioned across the North West in response to a growing need to understand more about the mental wellbeing of people in the region. The survey provides information about a broad range of factors related to mental wellbeing including feelings, relationships, life events, health and local area. This report summarises key results from the interviews conducted with Sefton residents as part of these two surveys.

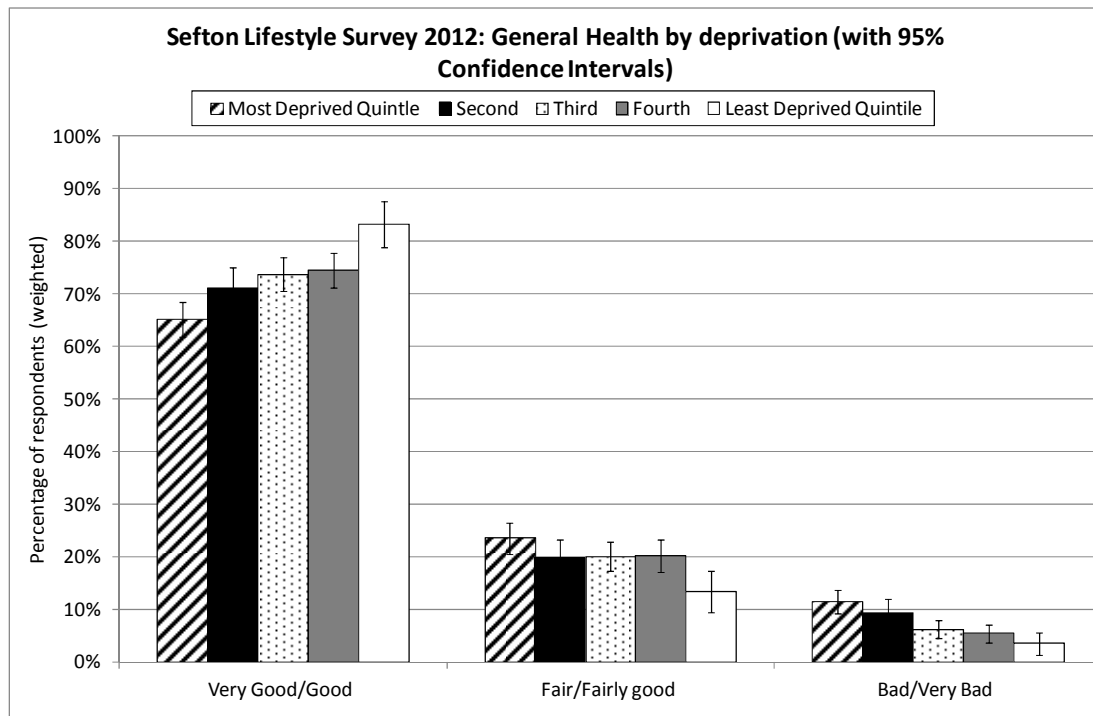
Methodology

Both surveys used face to face interviews to collect information from residents. The Merseyside Lifestyle Survey is the first time a face to face survey has been used to collect general health and lifestyle information in Merseyside. Therefore we are unable to make direct comparisons of the results to previous local lifestyle surveys. The Merseyside lifestyle survey resulted in a robust and representative sample of the population. A total of 13,121 interviews were conducted across Merseyside, 2,912 of which were with Sefton residents. The Sefton Wellbeing survey was conducted as part of a larger survey of mental wellbeing across the North West. This is the second time such a survey has been conducted, the first being undertaken in 2009. The 2012 survey sampled 11,500 North West residents of which 500 were from Sefton.

Key Results

General Health

70% of Sefton residents rate their health as good or very good and 21% consider themselves to have a long term health problem, illness or disability which limits their daily activities or the work that they do. Reporting poor general health and having a health problem or disability both increase with increasing deprivation. The proportion of respondents with a health problem or disability in the most deprived areas is double that of the least deprived areas.



Healthy Weight

Over 50% of residents have a Body Mass Index (BMI) that classifies them as overweight, obese or very obese – a figure similar to the Merseyside average. The proportion of overweight, obese or very obese individuals is higher in men (61%) than women (51%). The proportion of residents classified as obese also increases with increasing deprivation.

The Merseyside Lifestyle Survey collected a wealth of information about residents' diets. This included asking about takeaway food consumption - information that has not been collected previously. 23% of respondents consumed fast food at least once a week, mostly from local outlets rather than from a large chain (e.g. McDonalds, KFC, Dominos). Young age groups, single people and those from the most deprived areas are more likely to regularly have takeaway food.

In terms of activity, Sefton residents spend on average four and a half hours sitting or reclining per day, the longest of the 5 Merseyside local authority areas. Only 22% of Sefton respondents achieve the Chief Medical Officer (CMO) recommendation of 30 minutes of moderate or vigorous physical activity at least 5 days per week through work or leisure activities. However, respondents were more likely to engage in active travel, with 67% reporting at least 30 minutes walking or cycling for travel on a typical day.

Meeting the CMO recommendation through work and leisure shows little variation by deprivation but active travel is significantly higher in the most deprived area. Women, respondents not in work and those with long term illness are less likely to meet the recommended levels of physical activity or

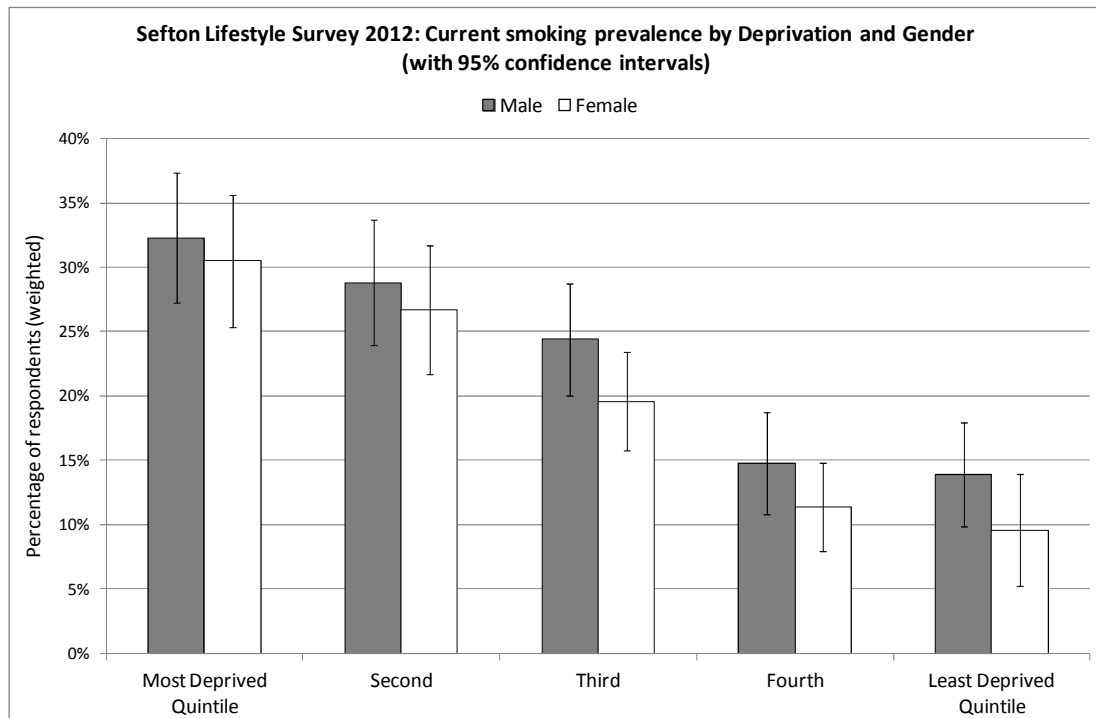
engage in active travel. Men and older people are more likely to have a higher average sedentary time per day than women and younger people.

Smoking

Sefton’s current smoking rate is 22%. This is the lowest smoking rate of the 5 areas who participated in the lifestyle survey and 6 percentage points below the Merseyside average.

Area	Smoking Prevalence (%)
Knowsley	32
Halton	30
St Helens	30
Liverpool	29
Sefton	22

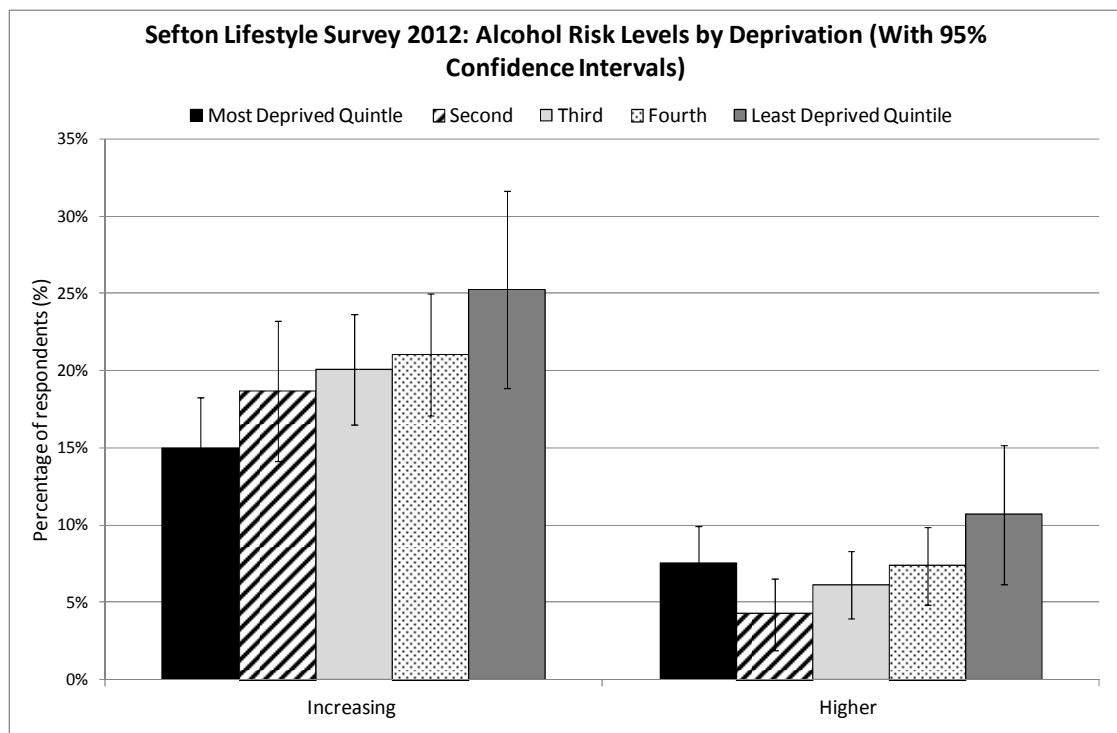
Smoking generally falls with age. The highest rate was found in the 25-34 age group at 30% and the lowest in the 65+ age group at 13%. Males, White respondents, those from the most deprived areas and those with a long term illness or disability were also more likely to smoke.



Alcohol

Risk Level	Units per week	
	Men	Women
Lower risk	0-21	0-14
Increasing risk	22-50	15-35
Higher risk	Over 50	Over 35

Sixteen percent of Sefton residents drink at increasing or higher risk levels, more than the Merseyside average (14%). Increasing risk drinking is more common amongst males and the 25-54 year old age group. Higher risk drinking, however, shows little variation by gender and is most prevalent in the youngest age group (18-24 year olds). Whilst increasing risk drinking increases as deprivation decreases, higher risk drinking is most prevalent in the least and most deprived areas.

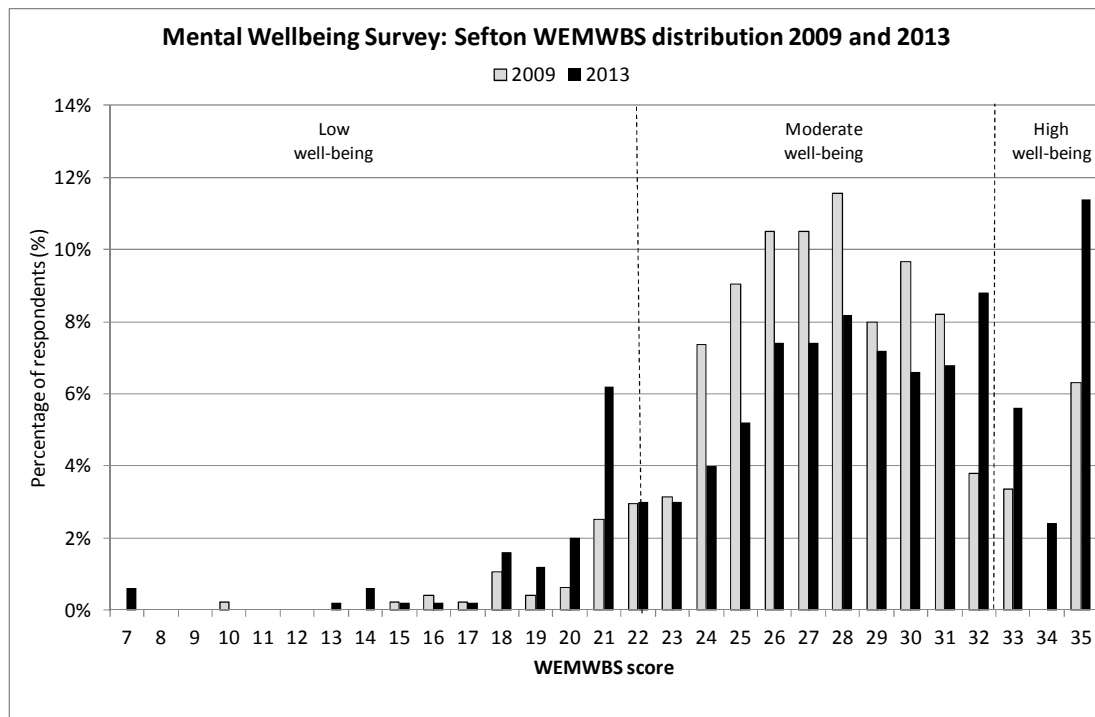


Mental Well Being

The Warwick-Edinburgh Mental Well Being Scale (WEMWBS) is a scale used to assess mental well being. WEMWBS consists of a set of 7 statements that respondents rate themselves against with answers that range from “none of the time” (scoring 1) to “all of the time” (scoring 5). Total scores are banded low (7-22), moderate (23-32) or high (33-35).

The WEMWBS was included in the Merseyside Lifestyle Survey and The North West Mental Wellbeing survey with both surveys reporting similar scores for Sefton. Approximately 22% of respondents have high mental well being, 63% moderate mental wellbeing and 15% low mental well being. The

North West Wellbeing survey found that Sefton's mean WEMWBS score has increased since the 2009 and is now greater than the North West average. The lifestyle survey also found that those who are divorced or separated, those who are not in work, those with a long term illness or disability and those with poor general health rate their mental wellbeing more poorly. Respondents from the two most deprived quintiles are more than twice as likely to have low mental well being as respondents from the least deprived quintile.



The Mental Wellbeing survey also informs us about two mental health indicators included in the Public Health Outcomes Framework- life satisfaction and anxiety. Approximately 80% of Sefton respondents stated that they were satisfied with their life on the whole, higher than the North West average (65%) and an increase from just over 60% in 2009. Approximately 3% of adults say that they are extremely anxious or depressed which is similar to the figure reported for Sefton in 2009.

Place

Ninety-three percent of Sefton residents are at least fairly satisfied with their local area as a place to live and just over 62% feel strongly that they belong to their immediate neighbourhood. Both these figures have improved since the 2009 survey and are higher than the North West averages (90% and 38% respectively). 46% of Sefton residents agree they can influence local decisions. This is higher than the North West average of 37%. Those with low mental wellbeing were less likely to feel they could influence decision making than those with high mental wellbeing.

Relationships

The Wellbeing Survey asked residents about their social contact with others. Contact with neighbours, friends and relatives have all decreased in Sefton. In 2009 most adults said they spoke to their neighbours on most days (57%). However in 2012, only 40% of residents speak to their neighbours most days, now the same as the proportion that speak to neighbours once or twice a week. The proportion of adults who never speak to their neighbours has also increased from 2% in 2009 to 4% in 2012. This trend is similar to the North West, which has seen a shift to speaking to neighbours less frequently. The survey also asked how often residents see friends or relatives who do not live with them. Again there has been a fall in the proportion of residents who see friends or relatives most days, from just over 50% in 2009 to just over 40% in 2012. Approximately 4% of Sefton residents meet with friends or relatives less frequently than once per month, which is slightly worse than the North West average.

However residents remain satisfied with the quality of their personal relationships. In 2012, 65% of Sefton adults were very satisfied with their personal relationships. This is broadly similar to the 2009 Sefton average and slightly better than the North West average of 60%. Only 1% of residents were very dissatisfied with their personal relationships, a similar figure to the North West and 2009 averages.

Money

In total, 37% of the Sefton population say that they never worry about money. This has improved since the 2009 survey and is now similar to the North West average. However, approximately 4% of Sefton's population say that they worry about money all the time, and a further 14% worry about money quite often. Those with low mental wellbeing are more likely to worry about money often than those with high mental wellbeing.

Conclusion

This report presents key results from two surveys recently conducted in Sefton. These surveys provide a rich source of intelligence that can be used to inform the development of effective population based interventions to improve health and wellbeing and to reduce inequalities. The Sefton Mental Wellbeing Survey updates our understanding of the population's mental wellbeing, allowing us to assess how it has changed since 2009 as well as how it compares to other North West local authorities. In contrast, the Merseyside Lifestyle Survey presents a new approach for collecting lifestyle information from residents. There are significant differences between this new survey methodology and ones used in the past. As a consequence, the results of this survey should not be compared with previous local lifestyle surveys as this could be misleading. The 2012 survey has, however, delivered a robust sample which allows comparisons to be drawn between Sefton and its neighbouring local authorities as well as between lower geographies such as CCGs and wards.

Appendix -Topics covered by the Sefton Lifestyle and Wellbeing Surveys

Merseyside Lifestyle Survey (2012)

Sefton level intelligence is available relating to the topics listed below. Analysis at sub-Sefton geographies and for different population groups may also be available. Please contact Business Intelligence & Performance to discuss any requirements.

- General Health and limiting longstanding illness
- Prevalence of health conditions
- Mental Wellbeing (WEMWBS)
- Physical Activity
- Active Travel
- Sedentary behaviour
- Fruit & Vegetable consumption
- Fast food consumption
- Bread and dairy consumption
- Salt consumption
- Oil and fat consumption
- Alcohol consumption
- Smoking
- Healthy Foundations (Health Attitudes and Motivations)

North West Mental Wellbeing Survey (2012/13)

Intelligence is available at the Sefton level on the following topics:

- Mental Wellbeing (WEMWBS)
- Anxiety and Depression
- Life Satisfaction
- Speaking to neighbours
- Contact with friends and family
- Ability to rely on others
- Satisfaction with personal relationships
- General health*, mobility and pain
- Activity and sedentary behaviour*
- Smoking status*
- Alcohol consumption*
- Cannabis Use
- Money
- Satisfaction with local area
- Sense of belonging to local neighbourhood
- Influence on local decision making

**Lifestyle information was collected to gauge associations with mental wellbeing. If interested in these topics in their own right please refer to the Merseyside Lifestyle Survey (2012) which provides greater detail and was collected from a larger sample of residents*