

WAKEFIELD JSNA

JOINT STRATEGIC NEEDS ASSESSMENT



Wakefield District Annual Report 2023: Adults

Released 12th May 2023

Contents and Introduction

This is a simple annual summary of the health and wellbeing needs of the adult population of Wakefield (aged 18 and over), focussing on those topics that have seen the most change in recent years or need the most attention.

This summary is structured in the same way as the main JSNA website (www.wakefieldjsna.co.uk) to act as a prompt to explore data further. Due to COVID-19, refreshing detailed local data on the JSNA was paused. The refresh has now restarted but will understandably take time.

This annual summary points local partners to where further investigation may be required, rather than providing great detail behind the needs of the population. There is also a focus on the inequalities that exist across the different topics, highlighting areas with particular groups of the population whose needs are greatest.

There is a separate Annual Report for children.

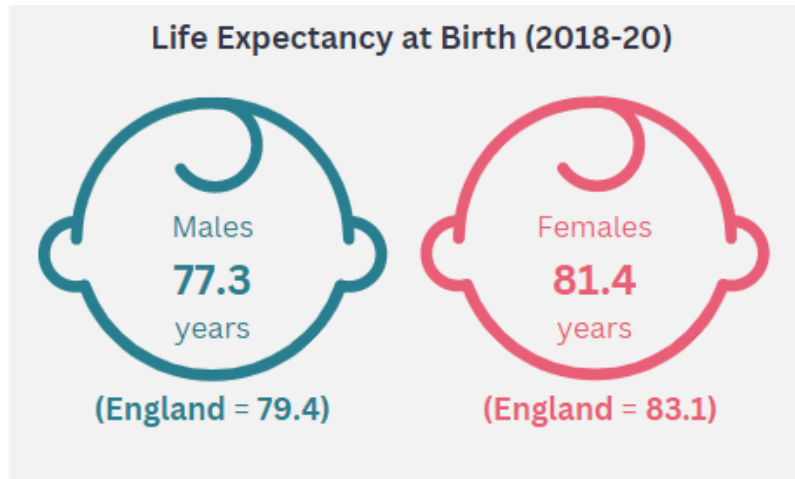
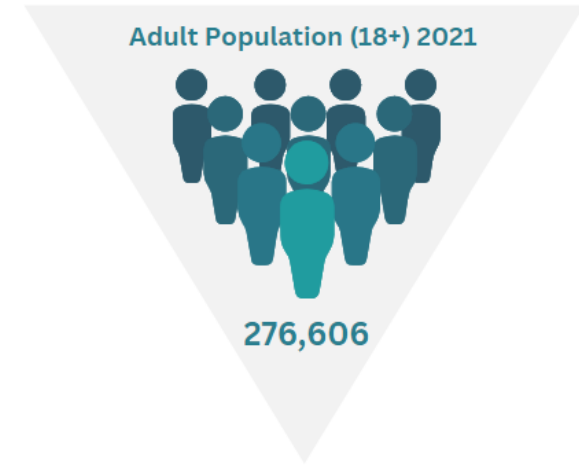
Further details can be found on the JSNA website and by visiting the links provided.

We welcome feedback, challenge or insight. Please contact: phi@wakefield.gov.uk

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Population

- There are **276,606** adults in Wakefield (2021). This figure increased by over 3,000 from the previous year.
- Over the next 10 years the **population** aged **75+** is projected to increase by 28% from just over 30,000 to almost 40,000.
- The proportion of the population from an **ethnic minority background** (all ethnicity groups except 'White British') has increased over time in Wakefield, from 7.2% in the 2011 Census to 11.8% in the 2021 Census.



- **Female** life expectancy is higher than **male** life expectancy and life expectancy is lower in the most **deprived** areas.
- **Healthy life expectancy** is the number of years a person can be expected to live whilst in **good health**. Healthy life expectancy for **males** is 58.0 (England is 63.1), for **females** it is 56.7 (England is 63.9) (2018-20). It is unusual for males to have a higher healthy life expectancy than females, looking at the regional and national picture males have a lower healthy life expectancy than females.
- Looking at the difference between healthy life expectancy and full life expectancy we can see that males are on average expected to **live in poor health** for 19.4 years and females for 24.7 years.

Associated JSNA pages: [Resident Population](#), [Life Expectancy](#) and [Ethnicity](#)

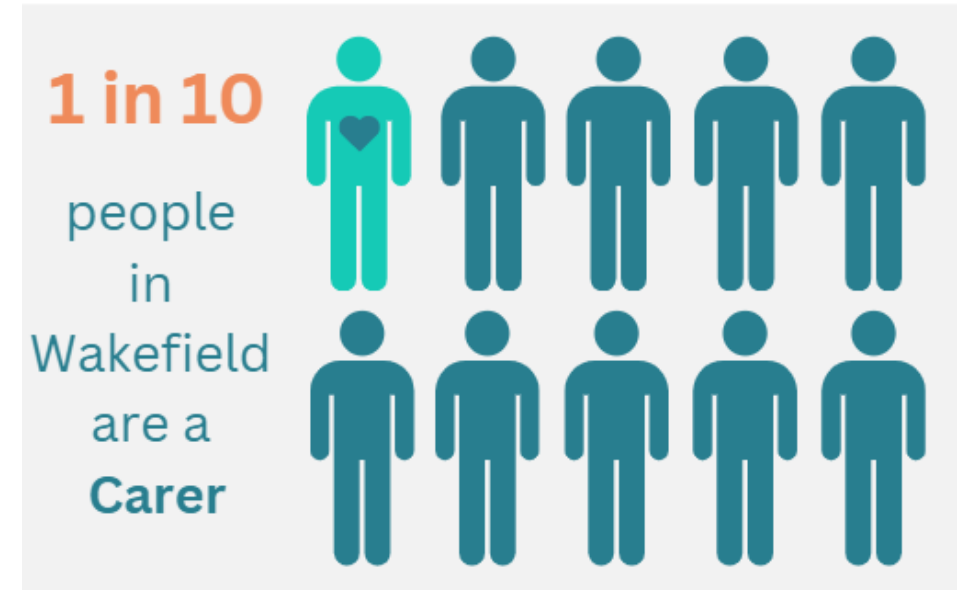
District Characteristics

Wakefield District is a diverse and changing place and there are a wide range of factors impacting the lives of local people and neighbourhoods. The health and wellbeing of the population can be greatly affected by the people and places that we interact with. Many of these factors are covered in more detail in the State of the District report that the Council produces. You can read the most recent publication here: [State of the District 2023](#)



Vulnerable Groups

- 31,731 people reported they do 19+ hours **unpaid care** a week (2021).
- 2 per 1,000 households were in **temporary accommodation** where a duty is owed (Q1 2022/23). This is above the regional average and has now slightly risen above the England average.
- 109 **traveller caravans** were counted in January 2020 and 166 in July 2021. These may accommodate family units, so there is likely to be many more individuals.



Reported domestic violence incidents



are increasing

- The number of **domestic violence** incidents has been increasing. However, policy and recording changes as well as encouragement for victims to report crimes, may have had a large impact on these figures. In 2022, **72%** of all domestic violence incidents involved a **female victim**.
- The Wakefield population aged 18+ estimated to have a **learning disability** is 6,519 (2020).
- 20.1% of Wakefield's population are **disabled** under the Equality Act (2021).

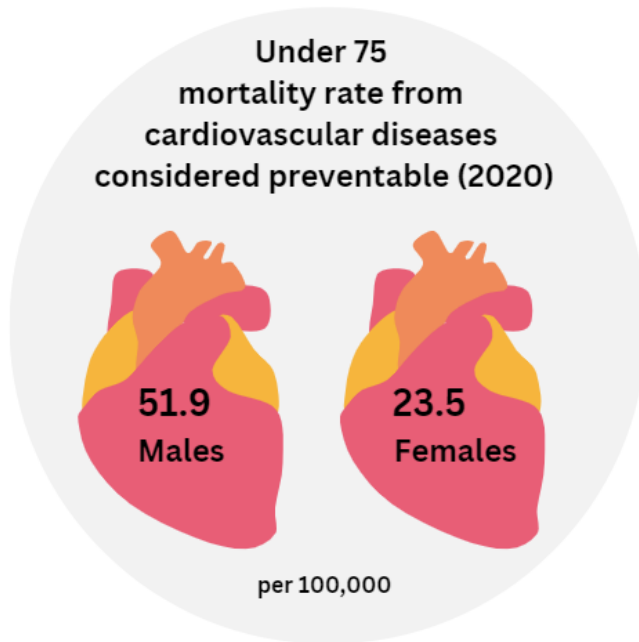
Associated JSNA pages: [Gypsy and Traveller Health Needs Assessment](#)

Health

- **79%** of people in Wakefield reported to be in ‘**good health**’ or ‘**very good health**’ (2021).
- The prevalence of **diabetes** (aged 17+) has gradually increased over recent years to **8.2%** in 2021/22 (England = 7.3%).
- **15.5%** of people in Wakefield have diagnosed **hypertension**, which equates to 55,233 people, however estimates suggest there are many undiagnosed cases (2021/22).



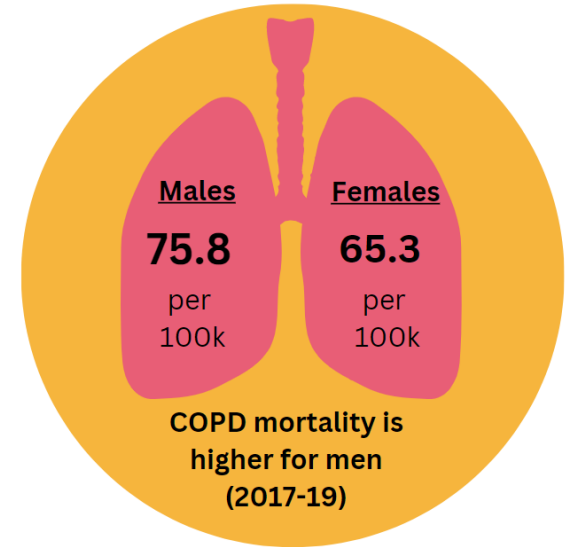
The prevalence of diabetes has increased (2020/21)



- The prevalence of GP recorded **cardiovascular disease** (CVD) in patients aged 18+ is 6.8% (2021). People dying young (under 75) from CVD is higher than the England average. The under 75 CVD mortality rate is far higher for males than females.
- **Stroke** prevalence is similar to the national average however, the **stroke mortality** rate under 75 years is significantly higher than the England average – with a rate of 18.1 per 100,000 (2020).
- The rate of people dying prematurely from **respiratory disease** is higher than the national average - 41.9 compared to 29.4 per 100,000 (2020). 7.6% have **asthma**, this is higher than the England average of 6.5% (2021/22).

Health

- The incidence of **Chronic Obstructive Pulmonary Disease (COPD)** is significantly higher than the national average. Across the district, 2.7% are suffering from COPD, compared to 1.9% across England (2021/22). The mortality rate is worse for males than females, however it is decreasing for males whilst remaining about the same for females. Emergency hospital admissions for COPD are significantly higher than the national average.
- 21.9% of people in Wakefield report a long-term **Musculoskeletal** problem (2021), which is above the national average (17.0%).



- **Dementia** prevalence is 3.6% (age 65+), which equates to 2,358 individuals, and is lower than the national and regional figures. The estimated diagnosis rate is in line with the national and regional figures (2020).
- The **suicide** rate for the district is 17.3 per 100,000, which is significantly higher than the England rate of 10.4 (2019-21) and the worst in the Yorkshire and Humber region. The rate is much higher for males (24.1) than for females (10.9), which is a similar picture nationally.
- 28% of people from Wakefield recorded a high **anxiety** score (6 to 10) in the ONS well-being survey during 2020/21 (England = 24%) and GP records show there are 41,500 adults (13.6%) in Wakefield District with an unresolved record of **depression** (2020/21).

Health Risk Factors

- 15.6% of adults in Wakefield **smoke** (2021), however this has been decreasing over the years. It is no longer statistically significantly higher than the national average.
- In 2021/22, an estimated 1,559 per 100,000 **hospital admissions** in the district were attributable to smoking.
- People from **poorer backgrounds** are more likely to be smokers – 32.9% in the most deprived communities and 8.0% in the least deprived. Men are most likely to smoke.
- The mortality ratio for **deaths in drug treatment** is 1.35 (2018/19 - 2020/21). This is calculated by looking at the number of deaths compared to the expected number of deaths. This has been increasing over the years and, in the last 3 years, it has been statistically significantly higher than the England average.

Smoking prevalence is falling

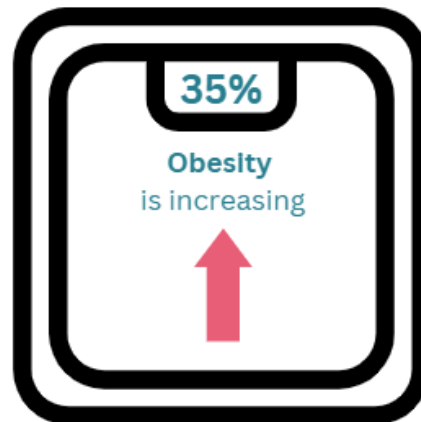
25.1%
(2012)

↓

15.6%
(2021)



- Admission episodes for alcohol related conditions are higher in males and those living in deprived areas. The rate is 523 per 100,000 (2020/21).

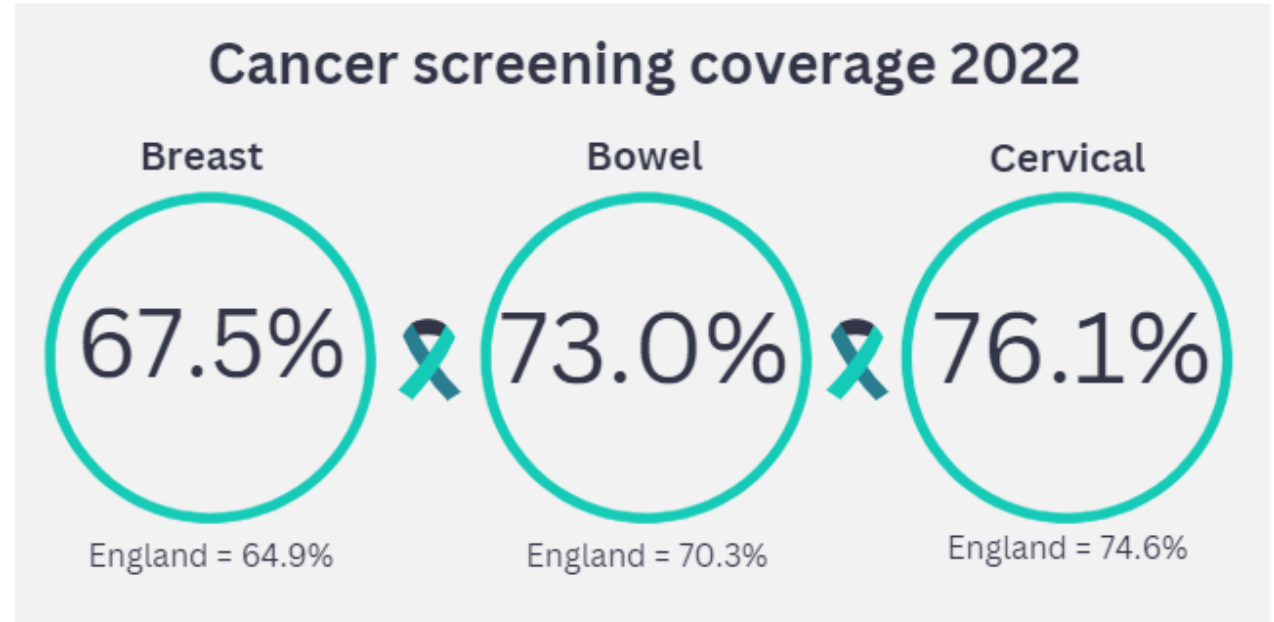


- 34.9% of adults are living with obesity (2020/21), which is a 10% increase from 2019/20 and significantly higher than the England average of 25.3%. The percentage of physically active adults (67.2%) is in line with the England average (2020/21).

Protection and Prevention

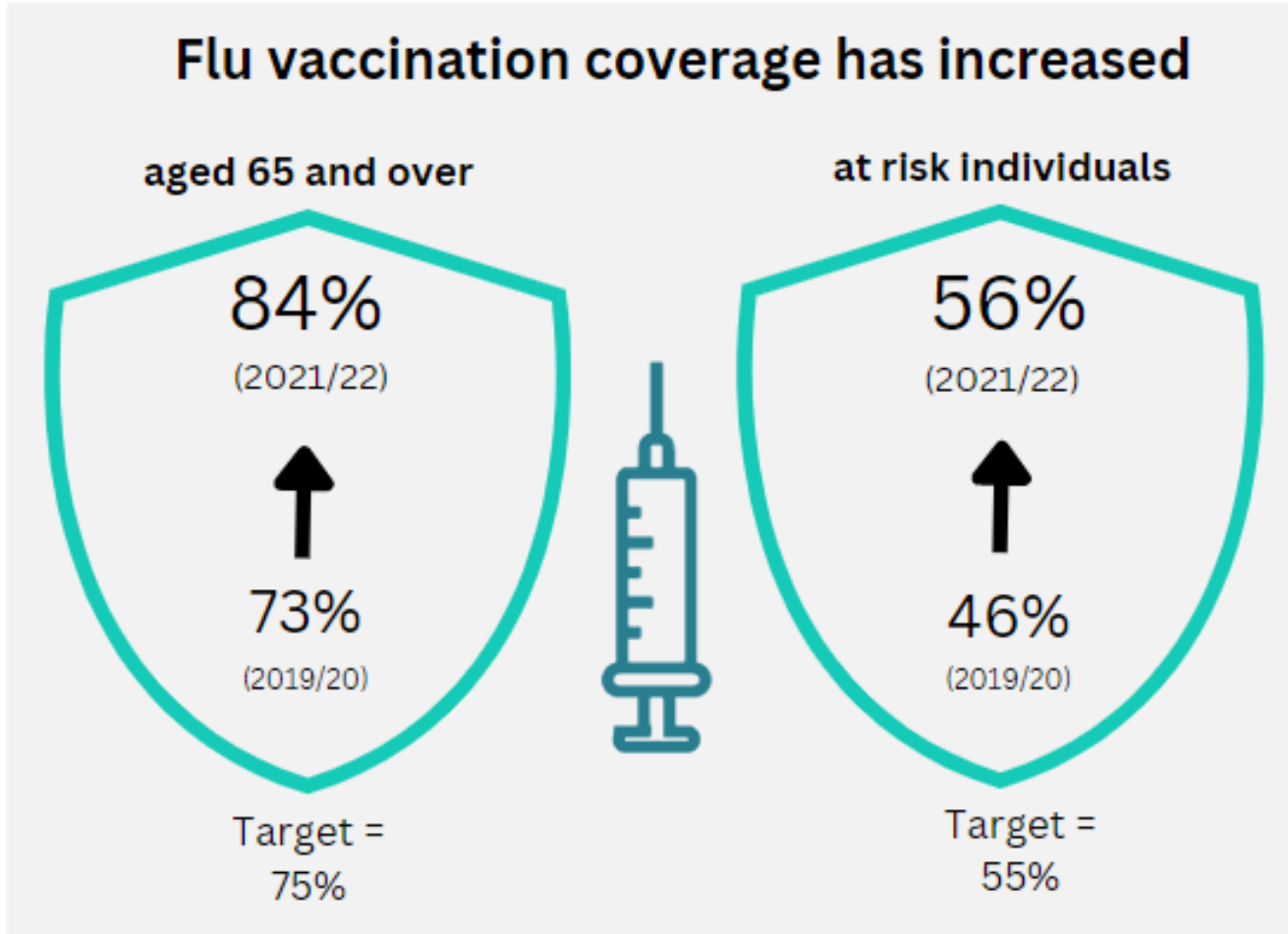
Screening and immunisation programmes are an important part of preventing ill health and ensuring that conditions are discovered early to provide successful treatment. The Covid pandemic may have disrupted appointments, possibly affecting the rollout of screening and immunisation programmes.

The proportion of eligible people who receive cancer screening is better than the national average for all 3 programmes.



- **Bowel** screening coverage is increasing and has been over the years.
- **Breast** screening dropped dramatically in 2021 as did the regional and national rates.
- The proportion of eligible people (age 50-64) who receive **Cervical** screening has been decreasing over the last 10 years.
- During the last couple of years **Cancer Champions** have been contacting people who have missed screening appointments. The programme has had a positive effect on bowel and cervical screening rates in Wakefield.

Protection and Prevention



- The percentage of the **over 65** population that received a **flu vaccination** (2021/22) increased considerably compared to 2019/20. It is in line with the regional figure, above the national figure and above target.
- **'At risk' flu vaccination** is significantly higher than the national average for the first time in years.
- The autumn booster **COVID-19 vaccination** uptake (50+) as at the end of January 2023 was 68.2%. The percentage of the population aged 12 and over who have had their booster or 3rd dose is at 63.6%. 79.4% of the total population aged 12 and over have had their 2nd dose.

COVID-19

- COVID-19 continues to have an impact on everyone, however it is very difficult to understand and measure the extent of the impact. The full impact may not be obvious right now but work is ongoing as more information becomes available. The significant and immediate changes in 2020 meant that many routine data collections were interrupted or stopped.
- The greatest immediate impact of COVID-19 was felt in certain groups of our population; those that were already more vulnerable or suffering poorer health and wellbeing outcomes, for example people living in more deprived areas who worked in jobs where they were at increased risk of being exposed to infection.

Case rates and vaccinations

- Since COVID-19 testing practices eased in early 2022 due to national policy change, local level case rate data became less robust.

References and Resources

- [Fingertips Public Health Profiles](#)
- [Wakefield JSNA](#)
- [State of the District 2023](#)
- [Census 2021](#)
- [Poppi and Pansi](#)
- [GOV.UK Research and Statistics](#)
- West Yorkshire Police
- [OHID Picture of Health](#)
- [Coronavirus National Dashboard](#)