Area overview profile for Inner West Community Committee

This profile presents a high level summary of data sets for the Inner West Community Committee, using closest match Middle Super Output Areas (MSOAs) to calculate the area.

All ten Community Committees are ranked to display variation across Leeds and this one is outlined in red.

If a Community Committee is significantly above or below the Leeds rate then it is shaded red or green respectively, otherwise it is shown as white. Leeds overall is shown as a horizontal black line, Deprived Leeds* (or the deprived fifth**) is a dashed horizontal. The MSOAs that make up this area are shown as red circles and often range widely.

Population: 77,066	37,366	39,700

Females   Males
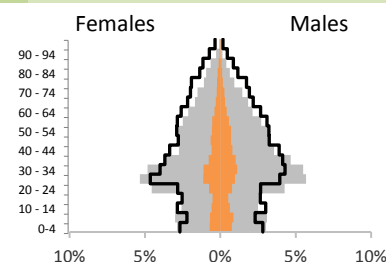

Comparison of Community Committee and Leeds age structures in October 2018. Leeds is outlined in black, Community Committee populations are shown as orange if inside the most deprived fifth of Leeds, or grey if elsewhere.

Pupil ethnicity, top 5	Area	% Area	% Leeds
White British	6,948	67%	65%
Any other white background	733	7%	5%
Pakistani	565	5%	6%
Black African	464	4%	5%
Any other ethnic group	251	2%	2%

(January 2018, top 5 in Community committee, corresponding Leeds value. Includes unknowns)

Deprivation distribution

Proportions of this population within each deprivation 'quintile' or fifth of Leeds (Leeds therefore has equal proportions of 20%), October 2018.

Pupil language, top 5	Area	% Area	% Leeds
English	8,174	79%	79%
Other than English	407	4%	1%
Polish	317	3%	2%
Urdu	274	3%	3%
Panjabi	120	1%	1%

(January 2018, top 5 in Community committee, corresponding Leeds value. Includes unknowns)
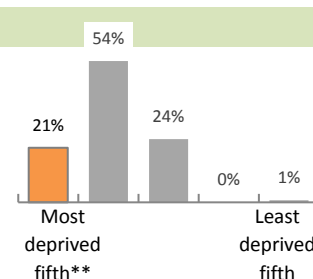
GP recorded ethnicity, top 5	% Area	% Leeds
White British	73%	70%
Other White Background	11%	10%
Pakistani or British Pakistani	3%	3%
Black African	3%	3%
Other Ethnic Background	2%	2%

(October 2018, top 5 in Community committee, and corresponding Leeds values. Does *not* include unknowns)

Life expectancy at birth, 2014-16 ranked Community Committees

ONS and GP registered populations
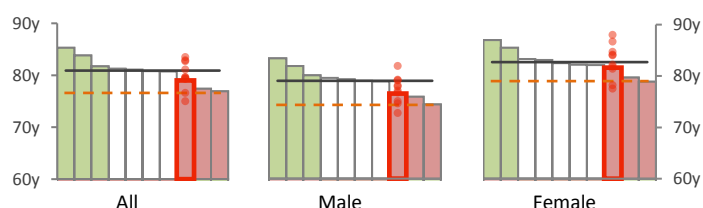
(years)	All	Males	Females
Inner West CC	79.0	76.6	81.6
Leeds resident	80.9	79.1	82.7
Deprived Leeds*	76.6	74.4	79.0

"How different is the life expectancy here to Leeds?"

The three charts below show life expectancy for people, men, and women in this Community Committee in red against Leeds. The Community Committee points are coloured red if the it is significantly worse than Leeds, green if better than Leeds, and white if not significantly different.

Life expectancy in this Community Committee is significantly worse than that of Leeds and it has been this way since 2011-13. Female life expectancy was not significantly different to Leeds briefly in 2013-15.


The Office of the Director of Public Health, Leeds City Council. January 2019

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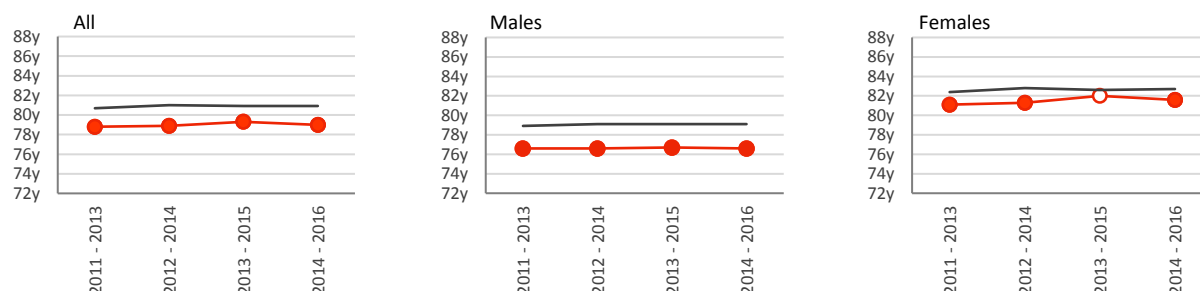
Child obesity - Year 6

Child obesity data is shown here for Year 6 classes in Leeds in 2016-17.

The Community Committees are displayed in deprivation order with the most deprived on the left. The proportions of 'healthy weight' increase as deprivation falls, this is mostly due to larger 'very overweight' groups in more deprived areas.

- ■ Underweight
- ■ Healthy Weight
- ■ Overweight
- ■ very overweight
- ▢ This Community Committee
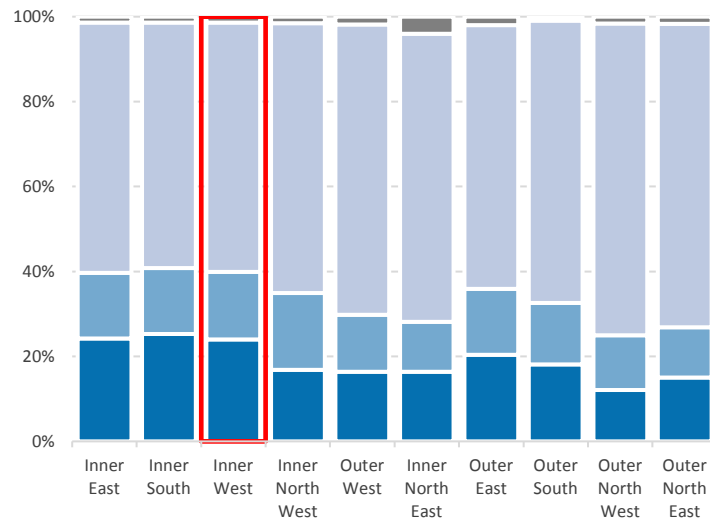
Looked after children

Number of looked after children in Community Committees from 2016-17.

The Community Committees are shown ranked by deprivation and despite variations in population sizes the general picture shows larger counts in more deprived areas. Children living inside the most deprived fifth of Leeds are shown in orange.

- ■ Not in deprived 5th
- ■ In most deprived fifth
- ▢ This Community Committee
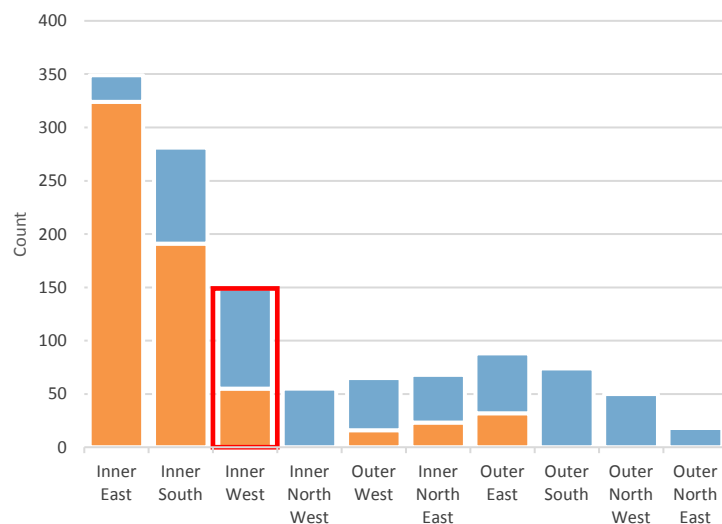
Job seekers allowance

Counts of adults receiving Job Seekers Allowance in August 2018. the data is split by the amount of time spent receiving the allowance.
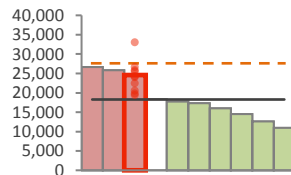
The Community Committees are ranked by levels of deprivation and despite variations in population size and structure, there is a clear reduction in numbers as deprivation falls.

- ■ 1 to 13 weeks
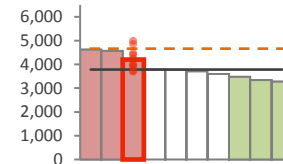- ■ 13 to 52 weeks
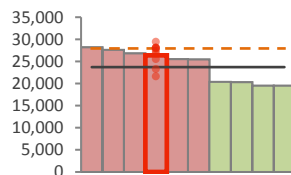- ■ 52+ weeks
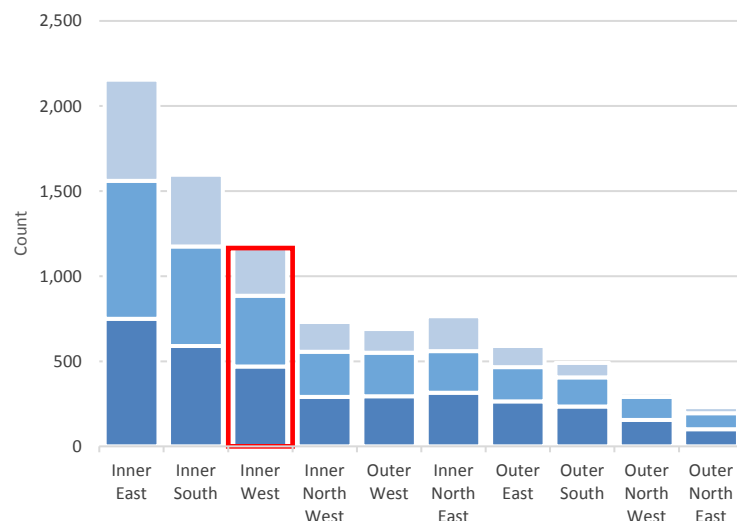
GP recorded conditions, persons (DSR per 100,000)

Smoking (16y+)

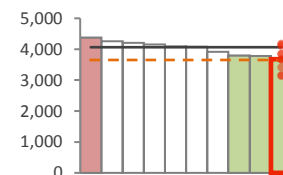|	
Inner West CC	24,589
Leeds	18,277
Deprived fifth**	27,619

CHD

Inner West CC	4,196
Leeds	3,783
Deprived fifth	4,663

Obesity (16y+ and BMI>30)

Inner West CC	26,391
Leeds	23,712
Deprived fifth	27,935

Cancer

Inner West CC	3,679
Leeds	4,065
Deprived fifth	3,653
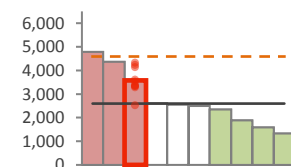
COPD

Inner West CC	3,574
Leeds	2,596
Deprived fifth	4,589
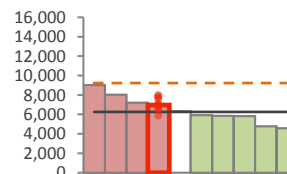
Diabetes

Inner West CC	6,985
Leeds	6,259
Deprived fifth	9,233
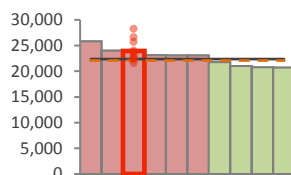
Common mental health

Inner West CC	23,939
Leeds	22,361
Deprived fifth	22,076
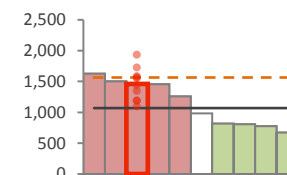
Severe mental health

Inner West CC	1,459
Leeds	1,069
Deprived fifth	1,565
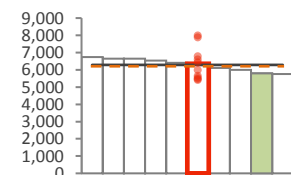
Asthma in children

Inner West CC	6,344
Leeds	6,286
Deprived fifth	6,207
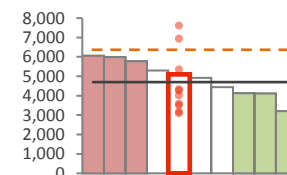
Dementia (over 65s)

Inner West CC	5,097
Leeds	4,701
Deprived fifth	6,367

The GP data charts show all ten Community Committees in rank order by directly standardised rate (DSR). DSR removes the effect that differing age structures have on data, and allow comparison of 'young' and 'old' areas. GP data can only reflect those patients who visit their doctor. Certain groups within the population are known to present late, or not at all, therefore it is important to remember that GP data is not the whole of the picture. This data includes all Leeds GP registered patients who live within the Community Committee. Obesity here is the rate within the population who have a recorded BMI. If a Community Committee is significantly above or below the Leeds rate then it is shaded red or green respectively, otherwise it is shown as white.

Alcohol dependency - the Audit-C test

The Audit-C test assesses a patients drinking habits, assigning them a score. Patients scoring 8 or higher are considered to be at 'increasing risk' due to their alcohol consumption.

The *proportion* of tests which score 8 or more are shown here for this Community Committee in blue with the Leeds rates overlaid in dark grey.

Men generally have a greater rate than women.

The Office of the Director of Public Health, Leeds City Council. January 2019

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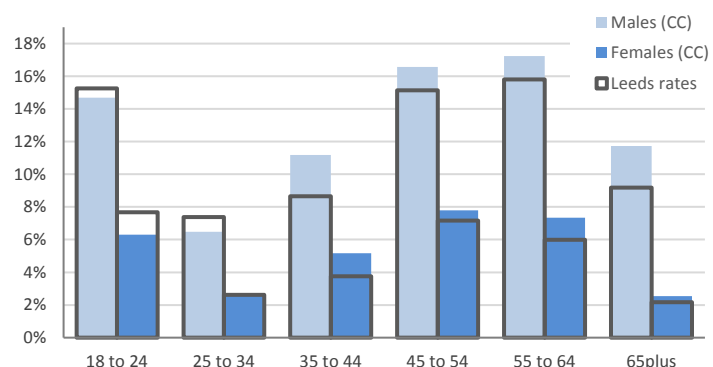
Alcohol specific hospital admissions, 2015-17 ranked
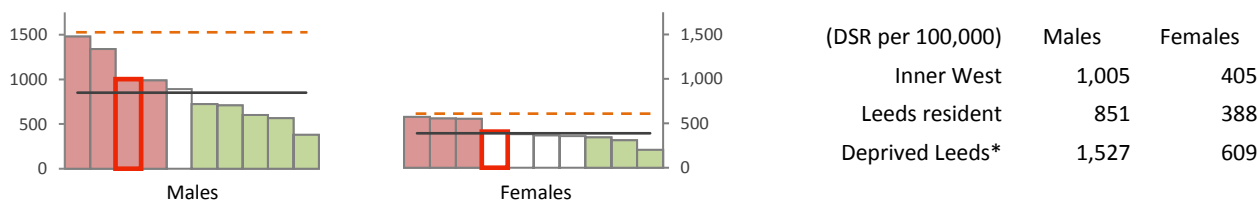
HES

(DSR per 100,000)	Males	Females
Inner West	1,005	405
Leeds resident	851	388
Deprived Leeds*	1,527	609

Mortality - under 75s, age Standardised Rates per 100,000

ONS and GP registered populations

"How different are the sexes in this area?"
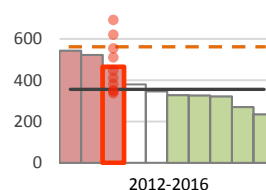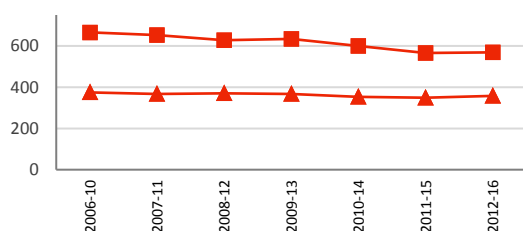
☐ Males
△ Females

Gender rates are solid red if they are significantly different to one another.

"Where is this Community Committee in relation to the others and Leeds?"
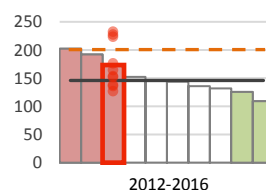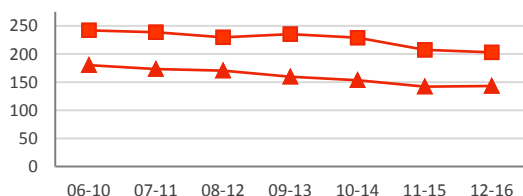
Community Committees are ranked by their most recent rates and coloured as red or green if their rate is significantly above or below that of Leeds.

Rates for small areas within this Community Committee are shown as red dots. This Community Committee is highlighted with a red border.
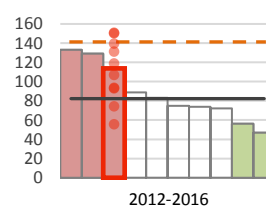
All cause mortality - under 75s

Persons (DSR per 100,000)
Inner West CC	465
Count of deaths in 2012-16	*1,111*
Leeds resident	356
Deprived fifth**	562

Cancer mortality - under 75s

Persons (DSR per 100,000)
Inner West CC	173
Count of deaths in 2012-16	*393*
Leeds resident	146
Deprived fifth	201

Circulatory disease mortality - under 75s

Persons (DSR per 100,000)
Inner West CC	114
Count of deaths in 2012-16	*265*
Leeds resident	82
Deprived fifth	141

Respiratory disease mortality - under 75s

Persons (DSR per 100,000)
Inner West CC	53
Count of deaths in 2012-16	*112*
Leeds resident	32
Deprived fifth	64
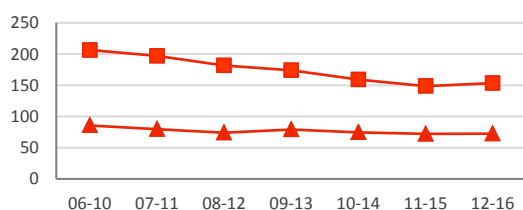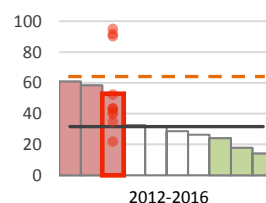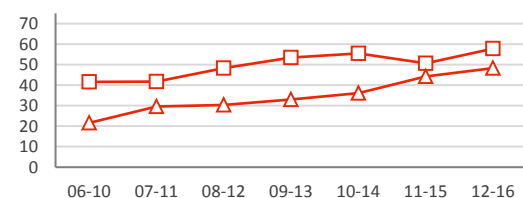
DSR - Directly Standardised Rate removes the effect that differing age structures have on data, allows comparison of 'young' and 'old' areas.

The Office of the Director of Public Health, Leeds City Council. January 2019

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Frailty rates - all ages

Rates of frailty (all ages) within whole populations. The Community Committees here are ordered from <u>most deprived on the left</u> to least deprived on the right.

Less deprived populations tend to have larger proportions of elderly patients, but in this chart the least deprived areas have some of the lowest rates of frailty.

Inner West Community Committee

The health and wellbeing of the Inner West Community Committee tends predominantly towards ill health. Over 20% of the population live in the most deprived fifth of Leeds**, and three quarters are living in in the most deprived two fifths of Leeds. Life expectancy within the Community Committee is significantly lower than Leeds for males and females, and has been for some time.

The age structure bears some resemblance to that of Leeds overall, with slightly lower proportions of elderly people, more children, and a slight excess of young males compared to the city. GP recorded ethnicity shows the Community Committee to have very slightly larger proportions of "White background" than Leeds. Around 9% of the GP population in Leeds have no recorded ethnicity and are not included here, which needs to be taken into account. The pupil survey shows a similar picture.

Child obesity in Year 6 follows a visible relationship with deprivation and this area has almost the largest proportion of 'very overweight' in Leeds, it also has the 3rd largest number of 'looked after children'.
Most GP recorded conditions for the population of this Community Committee are significantly higher than Leeds rates, the main exception is GP recorded cancer for which the area has the lowest rate in the city. This is not unexpected as deprived areas often have low GP recorded cancer due to non/late presentation.
Many areas of this committee are very deprived but one MSOA stands out – 'Armley, New Wortley' has the highest rates in the committee area for smoking, COPD and diabetes, and is very near the top for CHD and severe mental health issues.

The alcohol dependency test 'Audit-C' shows us that more men than women have scored highly, with proportions over double that of women for all age bands. Alcohol specific admissions to hospital are significantly above the Leeds rate for men. All-cause mortality is significantly above the Leeds average for the Community Committee and has been for many years, and while the male rate is falling steadily, the female rate has not altered much over time.

Cancer mortality rates are again much higher than Leeds, although male and female rates are not significantly different to each other. Circulatory disease mortality is well above Leeds but falling at a similar rate, male rates are significantly above those of women. Respiratory disease mortality shows a very steep climb and is now significantly above that of Leeds, both male and female rates are increasing fast and actually are not that different. Three MSOAs in this committee have respiratory disease mortality rates that are much higher than the rest, they are 'Bramley', 'Burley', and 'Armley, New Wortley', they are also the MSOA with virtually the highest smoking rates in this Community Committee area.

The **Map** *shows this Community Committee as a black outline. Health data is available at MSOA level and must be aggregated to best-fit the committee boundary. The MSOAs used in this report are shaded orange.*

* Deprived Leeds: areas of Leeds within the 10% most deprived in England, using the Index of Multiple Deprivation. **Most deprived fifth of Leeds - Leeds split into five areas from most to least deprived. Ordnance Survey PSMA Data, Licence Number 100050507, (c) Crown Copyright 2011, All rights reserved. GP data courtesy of Leeds GPs, only includes Leeds registered patients who are resident in the city. Admissions data Copyright © 2016, re-used with the permission of the Health and Social Care Information Centre (HSCIC) / NHS Digital. All rights reserved.