

Nottinghamshire Local Transport Plan Evidence Base Report

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3. Health

3.1 Nottinghamshire Joint Strategic Needs Assessment

The Nottinghamshire Joint Strategic Needs Assessment identified some key facts surrounding health in the county including:

- there is a 12 year gap in life expectancy for the over 50s between the best and worst wards in Nottinghamshire
- smoking is the greatest single cause of avoidable illness and preventable death in England but one in four adults in the county smoke
- reduced life expectancy is mainly due to heart disease, respiratory diseases and lung cancer – smoking is a contributing factor to all of these
- obesity reduces life expectancy by an average of nine years and obesity affects up to 15% of children and one in four adults in Nottinghamshire
- Mansfield has 6% more obese children than Rushcliffe
- alcohol and drug abuse in Nottinghamshire are an increasing source of ill health particularly amongst younger people
- the numbers of road casualties in Nottinghamshire are high, and
- road traffic injury is a major cause of death in 5 to 19 year olds.

3.1.1 People with disabilities

Figure 32 below shows the percentage of working age who are disabled and gives an indication of the level of disability by looking at the three classifications; 'DDA only disabled', 'DDA & also work limiting disabled' and all 'disabled'.

It can be seen quite clearly that Mansfield has the highest proportion of 'disabled' people with a rate of 26.7%. This is followed by Bassetlaw (23.9%), Broxtowe (22.7%) and Ashfield 21.9%. These four districts all have rates well above that of the East Midlands (19.2%) and the UK (18.6%). A similar pattern is evident when looking at the figures for 'DDA and also work limiting disabled' but the pattern for 'DDA only disabled' is quite different with only Broxtowe (5.6%), Bassetlaw (5.4%) and Ashfield (4.4%) being marginally above the regional figure of 4.3%.

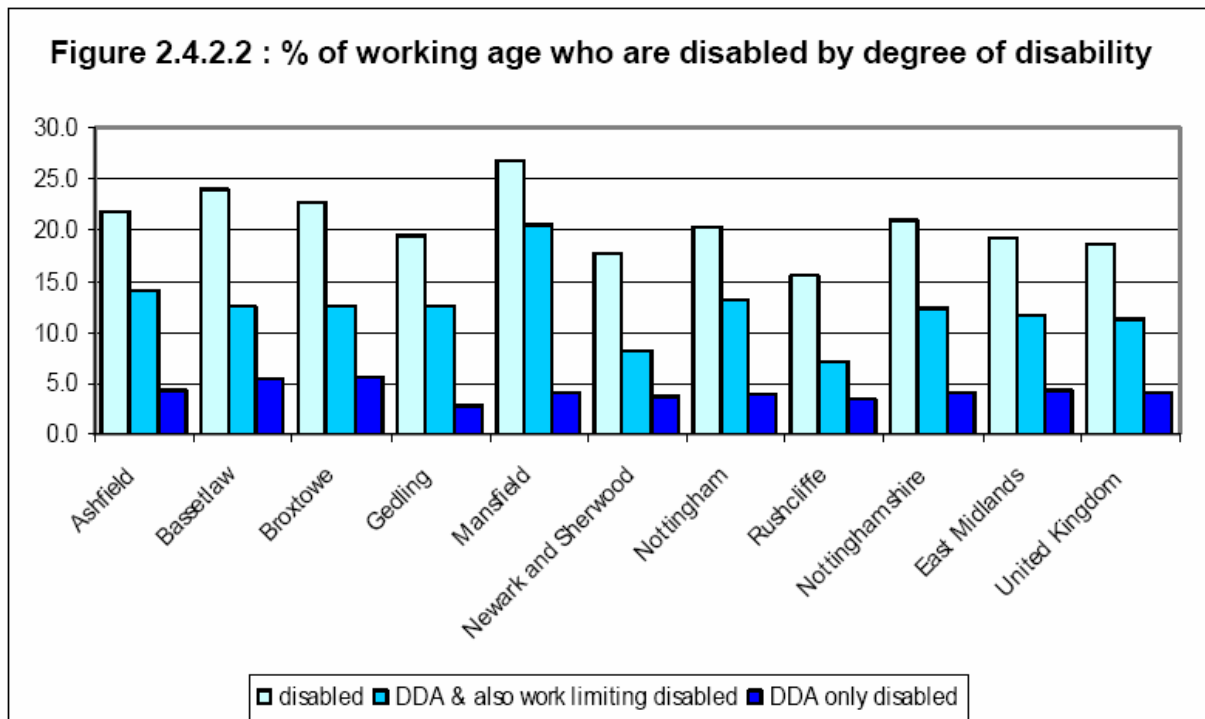


Figure 32: Percentage of working age population who are disabled by degree of disability

Source: Nottinghamshire Joint Strategic Needs Assessment 2009

Nottinghamshire Local Transport Plan Evidence Base Report

3.1.2 People with limiting long-term illnesses

Table 11 below shows the percentages of the population with a limiting long-term illness as well as the percentage of households with one or more people with a limiting long-term illness. The 2001 Census shows that 20% of the population of Nottinghamshire has a limiting long-term illness, which is above both regional (18.4%) and national (17.9%) averages

Table 11: Percentage of population and households with a limiting long-term illness

Area	Percentage of population with a limiting long-term illness	Percentage of households with at least one person with a limiting long-term illness
Ashfield	22.1%	40.0%
Bassetlaw	21.9%	39.4%
Broxtowe	18.2%	33.5%
Gedling	18.3%	33.6%
Mansfield	24.2%	43.4%
Newark & Sherwood	19.7%	36.0%
Rushcliffe	15.6%	29.2%
Nottinghamshire	20.0%	36.4%
East Midlands	18.4%	34.2%
England	17.9%	33.6%

3.1.3 People with sensory impairments

Councils are legally obliged to hold and maintain a register of visually impaired people but this is not the case for hearing impairment. The County Council's Adult Deaf and Visual Impairment Service collects data on the numbers of people with visual and hearing impairment registering with the Council.

The most recent statistics held by the NHS show that in Nottinghamshire there are:

- 1,811 registered blind people
- 2,800 registered partially sighted
- 740 known to the service who are pre-registered (people who are not registered but for whom support is offered to assist daily living)
- 198 deaf people who have speech
- 156 deaf people without speech, and
- 758 people who are hard of hearing.

The districts with the most numbers of people on the Visual Impairment Register in 2007 were Gedling, Bassetlaw and Ashfield, whilst those with the fewest were Rushcliffe and Mansfield.

In Nottinghamshire in March 2008 there were 140 dual sensory impaired people over the age of 18, although the majority of these were over 65 years of age.

3.2 Obesity

3.2.1 Adult obesity

When comparing the 2006-08 figures with 2003-05 figures, the percentage of obese adults (aged 16 and over) has decreased in each of the districts in the county, compared to a slight increase in England. The percentages of obese adults in Ashfield and Mansfield, however, remain higher than the average in the East Midlands and England. Table 12 and figure 33 below detail the percentage of the adult population (aged 16 and over) who are classed as obese.

Nottinghamshire Local Transport Plan Evidence Base Report

Table 12: Percentage of the adult population (aged 16 and over) who are obese

Area	Percentage of adults classed as obese		
	2000-02	2003-05	2006-08
Ashfield	25.9%	29.2%	28.2%
Bassetlaw	27.4%	27.6%	23.6%
Broxtowe	22.9%	23.9%	23.2%
Gedling	23.0%	23.9%	23.4%
Mansfield	24.6%	28.1%	25.0%
Newark & Sherwood	25.0%	25.5%	23.5%
Rushcliffe	20.4%	19.5%	19.0%
East Midlands	25.1%	25.6%	24.3%
England	21.8%	23.6%	24.2%

Source: 2001 Census data

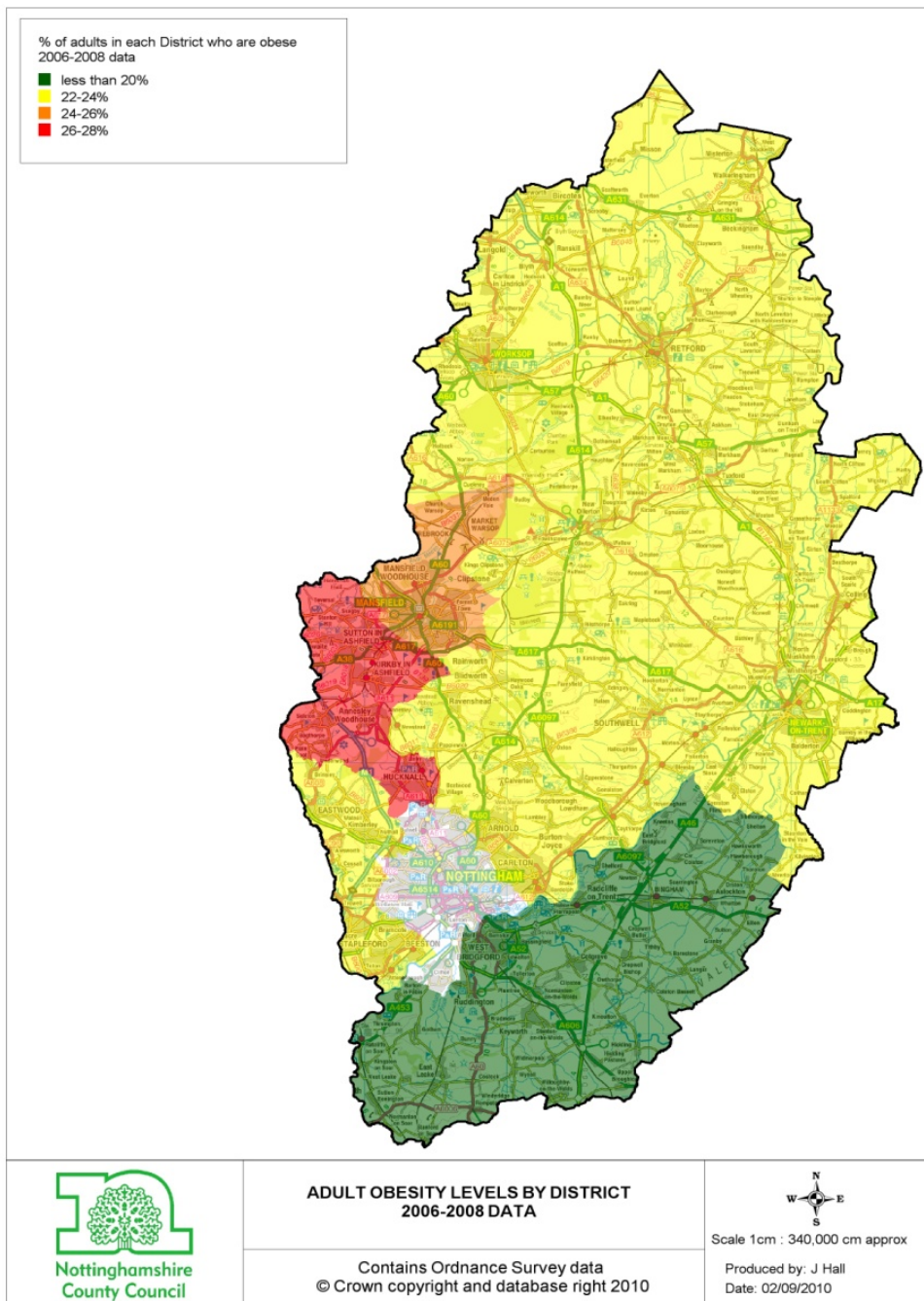


Figure 33: Percentage of adults aged 16 and over whom are obese in 2006-08 mapped by district
October 2010

Nottinghamshire Local Transport Plan Evidence Base Report

3.2.2 Child obesity

Child obesity levels in Ashfield, Bassetlaw and Mansfield are higher than the average in England. Rushcliffe has the lowest child obesity levels in the county. Table 13 and figure 34 below details the percentage of children (aged under 16) whom are classed as obese.

Table 13: Percentage of children (aged under 16) whom are classed as obese split by district.

Area	Percentage of children classed as obese
	2008-09
Ashfield	9.9%
Bassetlaw	10.5%
Broxtowe	7.7%
Gedling	9.5%
Mansfield	10.3%
Newark & Sherwood	8.7%
Rushcliffe	7.3%
Nottinghamshire	9.1%
East Midlands	9.1%
England	9.6%

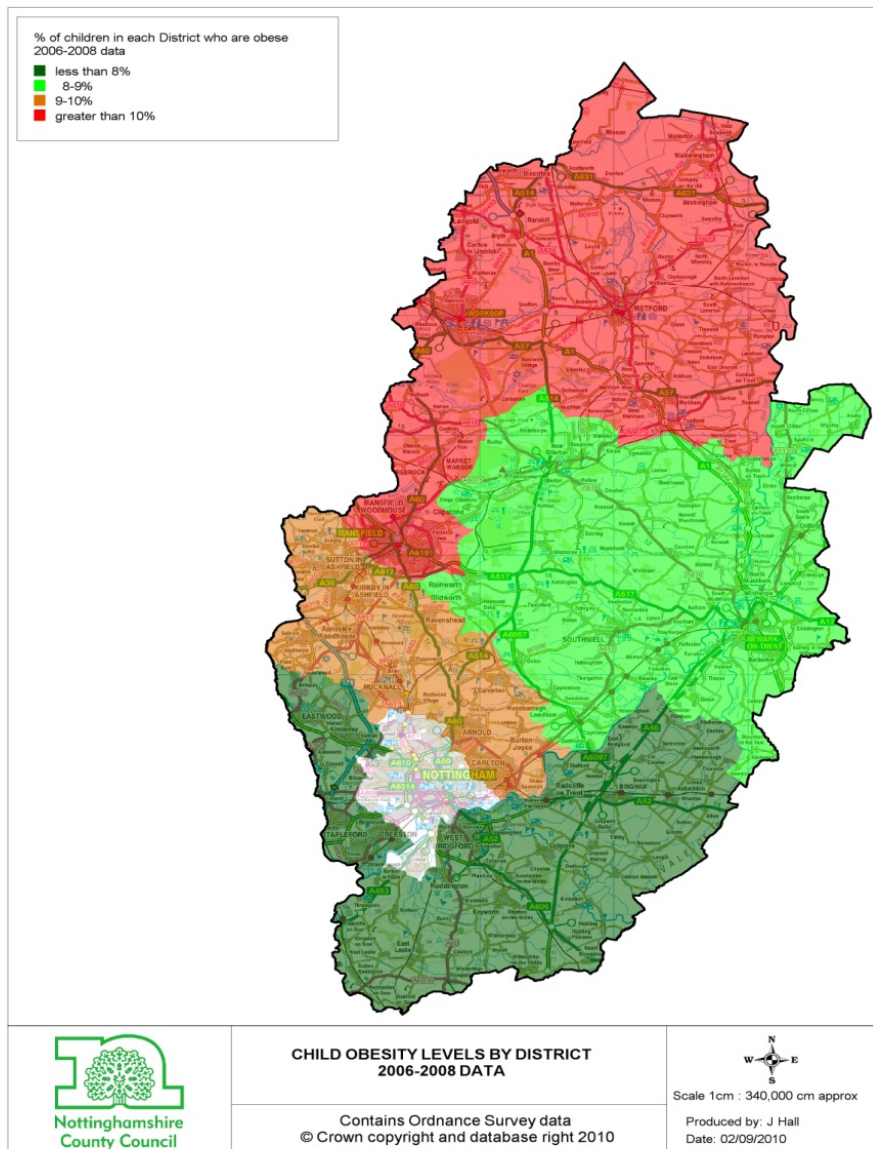


Figure 34: Percentage of children (aged under 16) whom are classed as obese split by district
October 2010

Nottinghamshire Local Transport Plan Evidence Base Report

3.3 Participation in sport and active recreation

Sport England’s Active People Survey (APS) records the percentage of the adult population who participate in sport and active recreation, at a moderate intensity, for at least 30 minutes on at least 12 days out of the last 4 weeks (equivalent to 30 minutes on 2 or more days a week). Interviews for the survey took place over a 12 month period – APS1 was undertaken in 2005/06; APS2 was undertaken in 2007/08; and APS3 was undertaken in 2008/09. At least 1,000 residents in each district completed the interview in 2005/06, with 500 from each district in subsequent years. Results of the survey are shown below in figure 35.

The survey results indicate that there has been a slight increase in adult participation in sport and active recreation each year at the national and regional level whilst in the county the rate fell in 2008/09 (APS3).

At the district level participation in sport and active recreation increased in Bassetlaw and Newark & Sherwood each year. Conversely, Ashfield experienced decreases each year resulting in Ashfield’s adult participation rate being the lowest in the county. When comparing 2008/09 and 2005/06 decreases were also seen in Broxtowe and Rushcliffe. Rushcliffe, however, maintains the highest activity rate in the county (despite significant fluctuations in each of the years), just ahead of Bassetlaw.

NI8: Adult Participation in Sport and Active Recreation

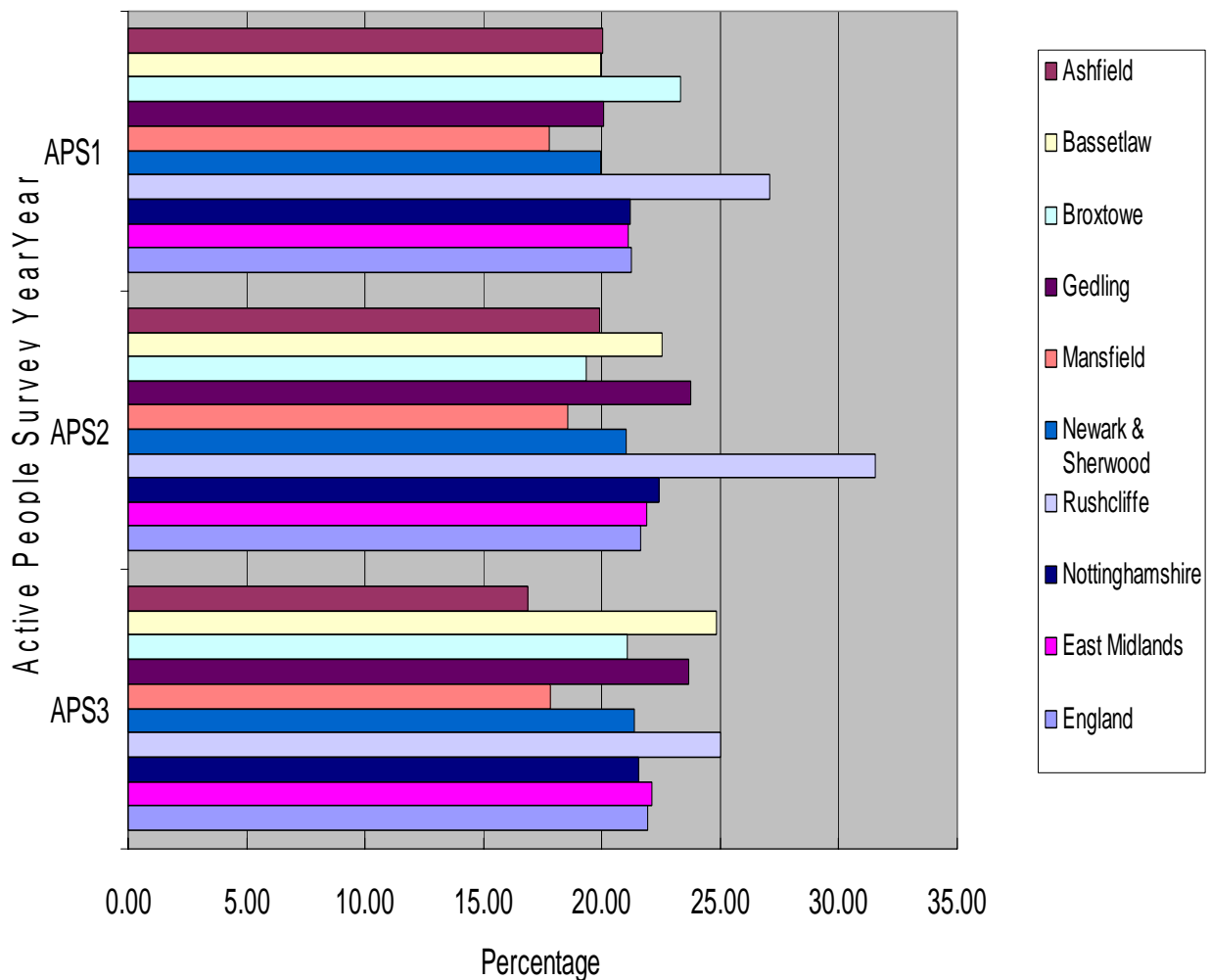


Figure 35: Adult participation in sport and active recreation
Source: Sport England

Nottinghamshire Local Transport Plan Evidence Base Report

3.4 Access to health

Table 14 below details the percentage of households with access to doctors' surgeries by public transport within 20 and 40 minutes, whilst table 15 details the percentage of households with access to a hospital by public transport within 20 and 40 minutes. Figures 36 and 37 below show the time taken to travel to doctors' surgeries and hospital by public transport respectively in Nottinghamshire. Access to these health locations by public transport is generally good although it is worse from the more rural parts of the county as seen in the length of time taken to travel to them in the tables and figures below.

Table 14: Access to doctors' surgeries by public transport

Area	Percentage of households with access to doctors' surgeries by public transport within	
	20 minutes	40 minutes
Ashfield	99%	100%
Bassetlaw	78%	98%
Broxtowe	100%	100%
Gedling	99%	100%
Mansfield	99%	100%
Newark & Sherwood	87%	99%
Rushcliffe	93%	100%
Nottinghamshire	94%	99%

Table 15: Access to hospitals by public transport

Area	Percentage of households with access to hospitals by public transport within	
	20 minutes	40 minutes
Ashfield	45%	99%
Bassetlaw	28%	64%
Broxtowe	20%	98%
Gedling	42%	98%
Mansfield	41%	98%
Newark & Sherwood	24%	60%
Rushcliffe	27%	82%
Nottinghamshire	33%	86%

Nottinghamshire Local Transport Plan Evidence Base Report

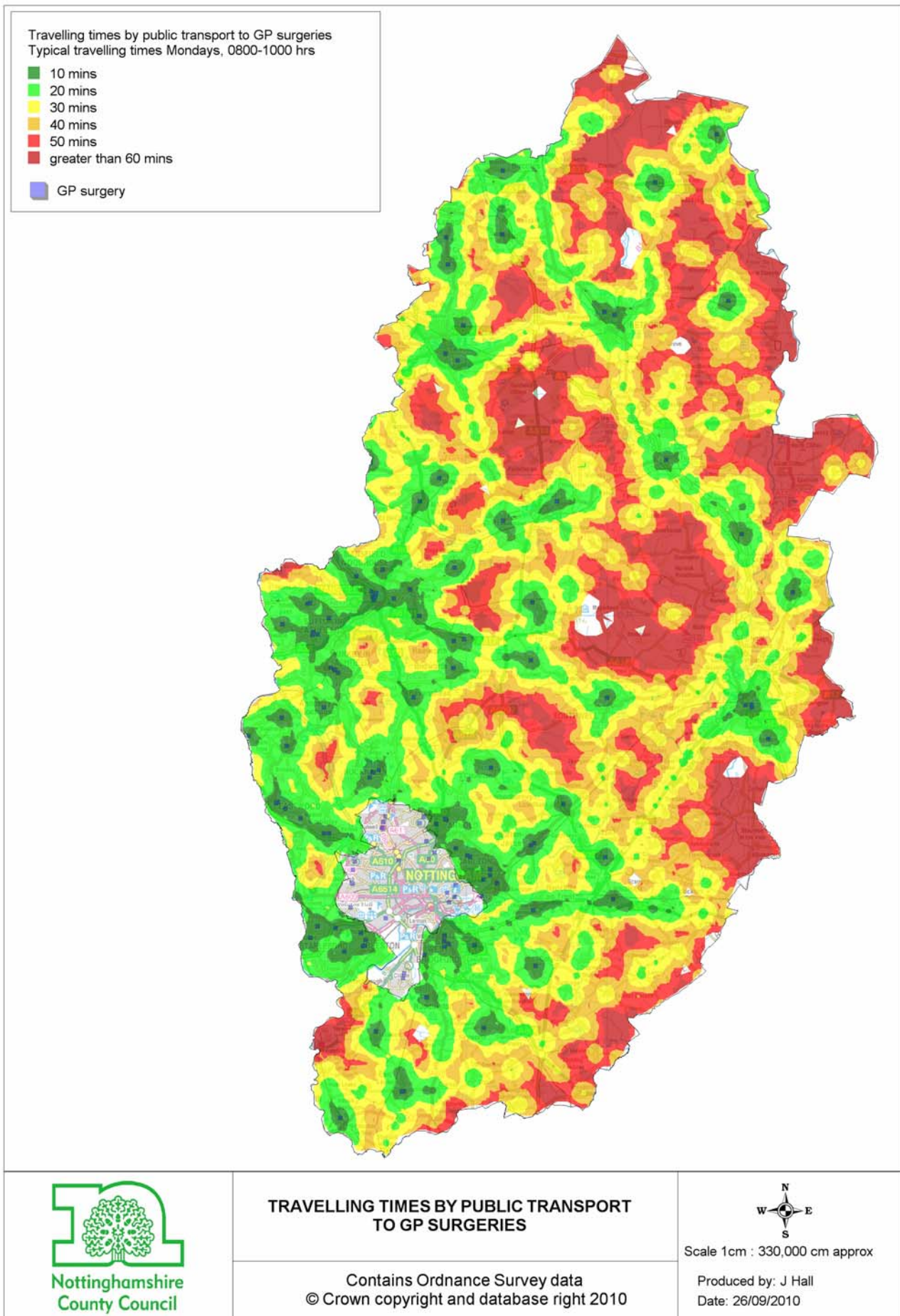


Figure 36: Travelling time by public transport to doctors' surgeries in Nottinghamshire

Nottinghamshire Local Transport Plan Evidence Base Report

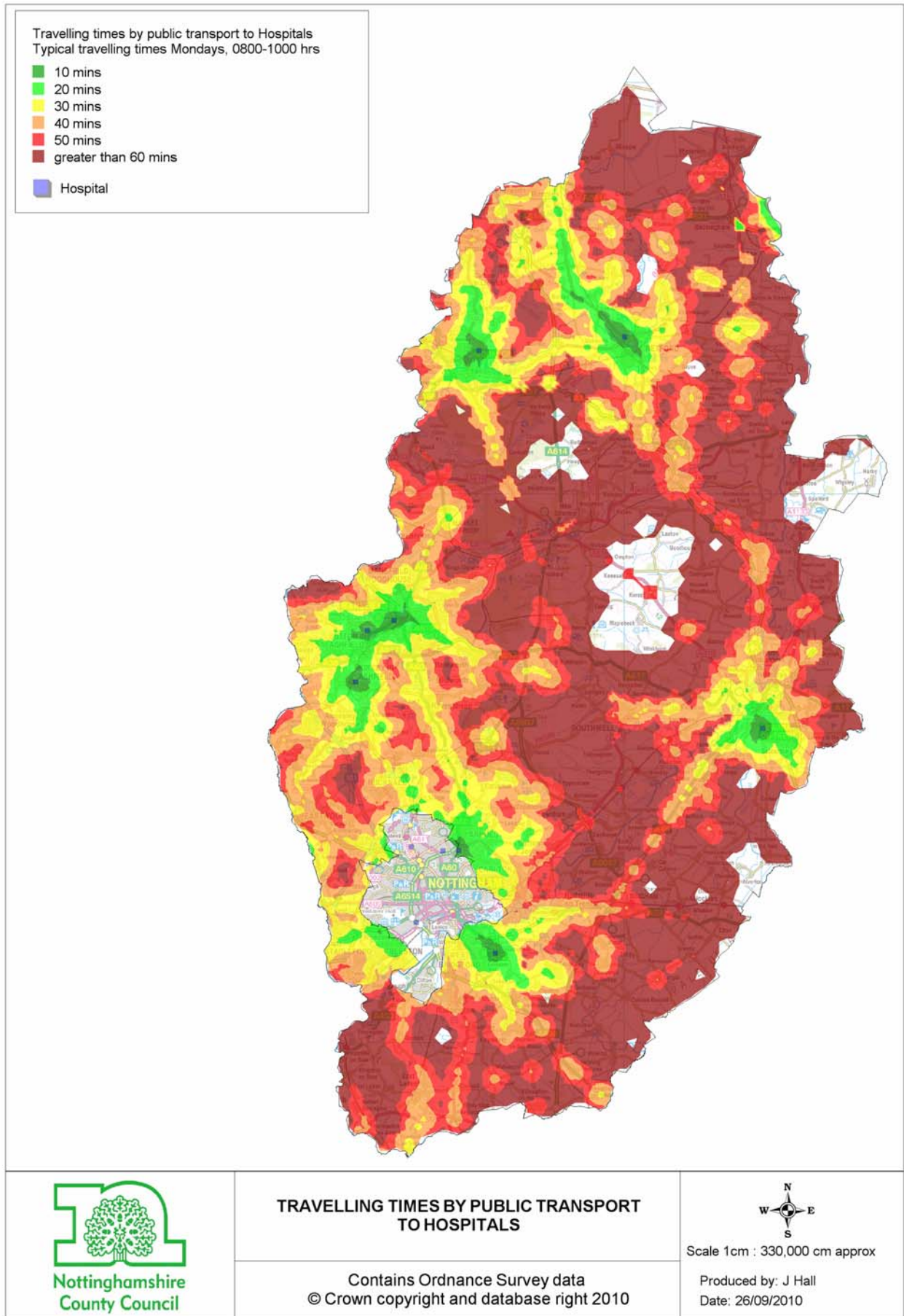


Figure 37: Travelling time by public transport to hospitals in Nottinghamshire
October 2010