

Summary for the North Kirklees Area of Kirklees

Introduction

This summary covers Batley East, Batley West, Birstall and Birkenshaw, Dewsbury East, Dewsbury South, Dewsbury West, Cleckheaton, Heckmondwike, Liversedge & Gomersal and Mirfield wards – the area covered by North Kirklees Clinical Commissioning Group (NKCCG). It draws on the relevant sections of the JSNA, which uses the latest available data and intelligence to detail a wide range of factors, behaviours, conditions and vulnerable groups. There are JSNA summaries covering Kirklees as a whole, children and young people, the clinical commissioning groups and the localities. The relevant sections give more detailed information and references. The summaries and sections are available on the JSNA webpage - [here](#).

A wide range of indicator tables have been developed as part of the JSNA process and they provide key data about Kirklees, the Greater Huddersfield area and the localities it covers. All the tables are available [here](#).

The summary tables that cover North Kirklees are available from the following links

- [CCG & Kirklees summary indicator table](#)
- [Comparisons between Kirklees, North Kirklees and localities](#)
- [Trends over time across Kirklees and North Kirklees and localities](#)

Headlines

The population of south Asian origin is increasing and there are a higher proportion of babies being born to south Asian mothers, now up to 2 in 5 births and 38% of all those aged under 18 in North Kirklees. 85% of these are living in Dewsbury and Batley.

Although North Kirklees is overall more deprived than Greater Huddersfield CCG, possibly an even greater factor impacting on local health are the lower levels of social pride and trust felt in the North Kirklees communities. This affects local people by increasing stress and thus increasing risk of ill health and disease.

Infant deaths are reducing, but too many white women smoke at delivery especially in Batley and Dewsbury.

Between 2005 and 2009 there have been major improvements in young people having their first drink at age 9 or less, 14-year olds being sedentary, adults doing recommended levels of activity, and educational attainment.

Educational attainment has improved from 2005 from 42% achieving five or more grades A*-C to 60% in 2012, 53% in Dewsbury. Girls did better than boys, 62% compared to 59%. South Asian students in Mirfield did better than in Dewsbury, 67% compared to 41%.

Breastfeeding needs to last longer than a couple of weeks to have a real impact on infant health.

Cancers and heart disease are all improving in causing early death and being detected earlier, although 1 in 4 early deaths are due to lung cancer. Much needs to be done to keep vigilant regarding early awareness and diagnosis.

Smoking remains at the heart of many of the diseases most common in North Kirklees such as cardiovascular disease (CVD), respiratory disease and cancers, especially lung cancer and infant and children's health. 1 in 5 (20%) adults smoked, a reduction from 1 in 3 (29%) in 2005 and 1 in 10 (10%) 14-year olds smoked. The real focus needs to be on young people and stopping them from starting smoking in the first place.

Obesity is rising in adults, though static in children (aged 10-11 years) at present, and affecting 1 in 5 of both groups. This is still a concern especially as it is the adults that influence the lifestyle and behaviours of children.

Alcohol remains a challenge, especially bingeing and its social consequences. Binge drinking is an issue in the overall population (1 in 6 females and 1 in 4 males) and especially in women of childbearing age (over 1 in 4 (26%)). The majority of the population in Kirklees are not concerned about the amount they drink.

More women of childbearing age are smoking (almost 1 in 4 (23%)), binge drinking (over 1 in 4 (28%)), and are not concerned about their levels of drinking. Only 1 in 3 (35%) of women of childbearing age meet the recommended level of physical activity.

Immunisation rates remain high, virtually at World Health Organisation targets and as such diseases remain thankfully low.

TB remains higher in Kirklees than other parts of West Yorkshire, which are declining.

Sexually transmitted infections are rising and HIV is still diagnosed at too late a stage in too many cases.

Good self-management can alleviate much of the distress and disability linked to the major conditions affecting North Kirklees, especially depression and anxiety, pain, and coping with any long-term condition.

Population and people

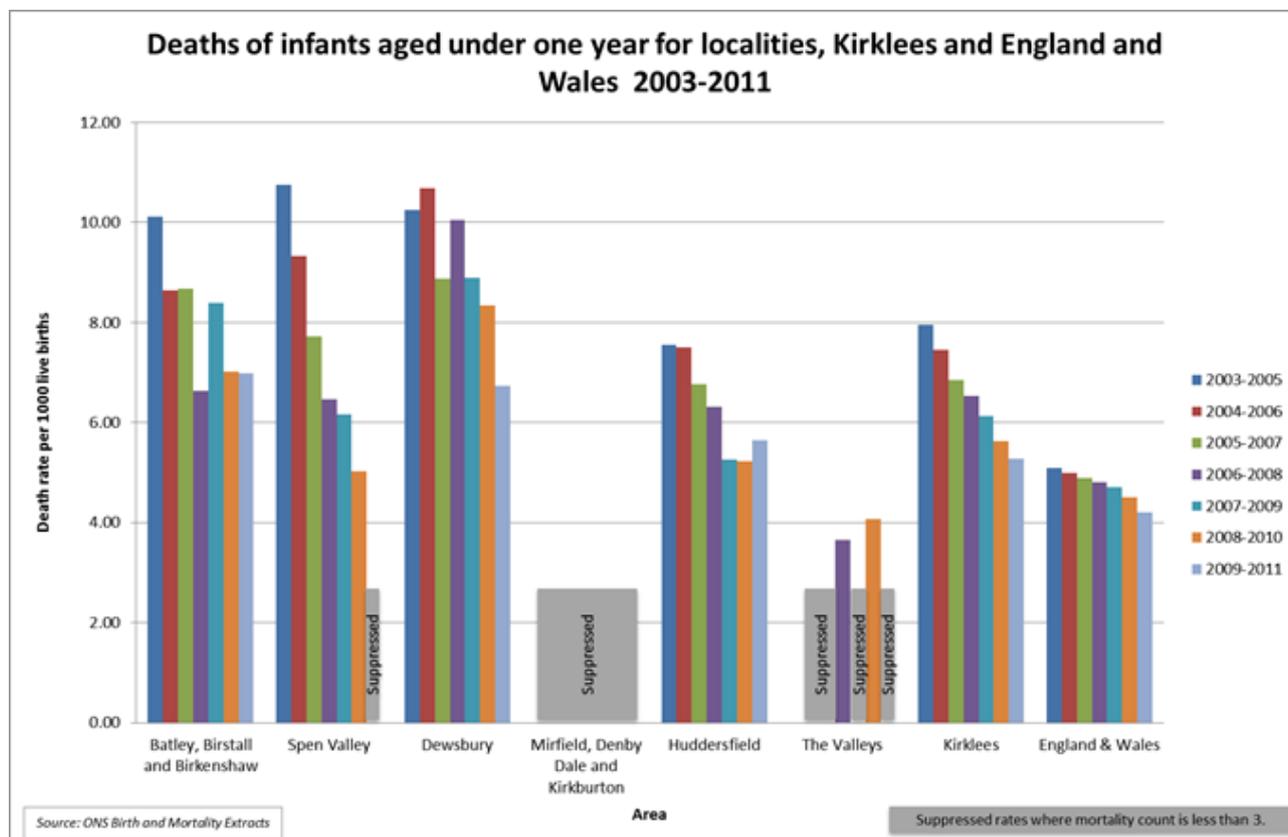
North Kirklees has a population of 190,244, which is predicted to rise by 12% by 2030 especially in those aged over 65 years, where 1 in 5 will be in this age group. The south Asian population is increasing, especially in Batley and Dewsbury where 38% of those aged under 18 are now south Asian.

Life expectancy at birth continues to increase but remains lower than nationally, significantly so for women. Male life expectancy at birth in North Kirklees in 2008-2010 was 77.1 years and female 81.0 years, compared to 78.5 years and 82.5 years nationally. Life expectancy in Dewsbury was significantly below the national rate for men and women, 76.2 years and 80.1 respectively. Men and women in Dewsbury can expect to live 3.8 years and 3.0 years respectively less than men and women in the Holme Valley. For women in Batley (80.6) and Spen Valley (81.0), their life expectancy was also below the national rate.

North Kirklees has a higher birth rate than nationally and is rising. Of births in 2012, 2 in 5 were to south Asian women rising from 1 in 3 in 2005. Stillbirths remain lower than nationally at 4 in every 1,000 births. Babies born with low birth weight had reduced to 9.5%; although this is still higher than nationally (smoking caused low birth weight in 1 in 3 babies). Batley had the highest rate of low birth weight babies in Kirklees (12%) and Mirfield was among the lowest (6.7%). Smoking in pregnancy has reduced to 17% from 19% in 2005 but not in white women (26%) amongst whom the highest rates were in Dewsbury (32%) and Batley (26%).

Infant mortality in North Kirklees decreased to 6.2 per 1,000 in 2009-11 from 10.7 in 2002-04. North Kirklees has continued to remain higher than the Kirklees average (5.3 per 1,000), however, the number is reducing and most localities have observations below five infant deaths (this can be seen in the graph below with data suppressed due to low numbers). Dewsbury has continued to have one of the highest infant mortality rates in Kirklees even though it has dropped from 13.4 in 2002-04 to 6.7 in 2009-11, it is still higher than 4.2 nationally. It is strongly linked to low birth weight, smoking and congenital abnormality, especially parental genetic closeness.

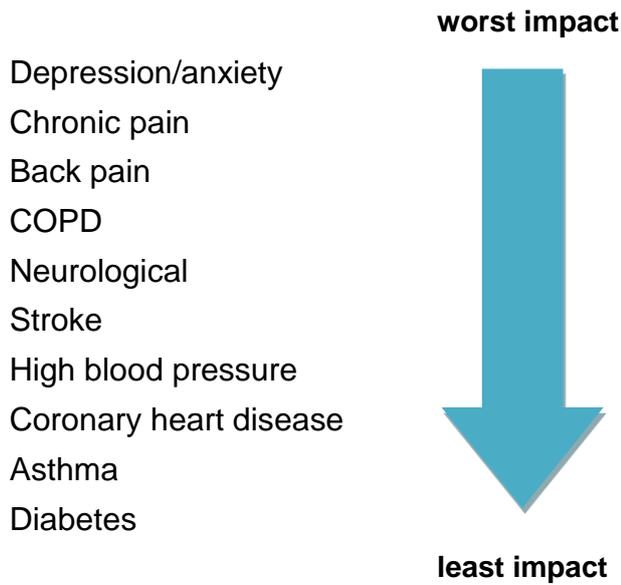
Breastfeeding initiation has generally remained static in North Kirklees between 2010 and 2013 at approximately 60% (Kirklees overall – 71%, and nationally – 74%). Dewsbury (56%) and Spen (56%) have poorer breastfeeding initiation rates in comparison to Kirklees overall. Breastfeeding at 6-8 weeks falls to 1 in 3 (36%) in North Kirklees and lowest rates are in Birstall & Birkenshaw (30%) and Spen (31%), compared to nationally (43%).



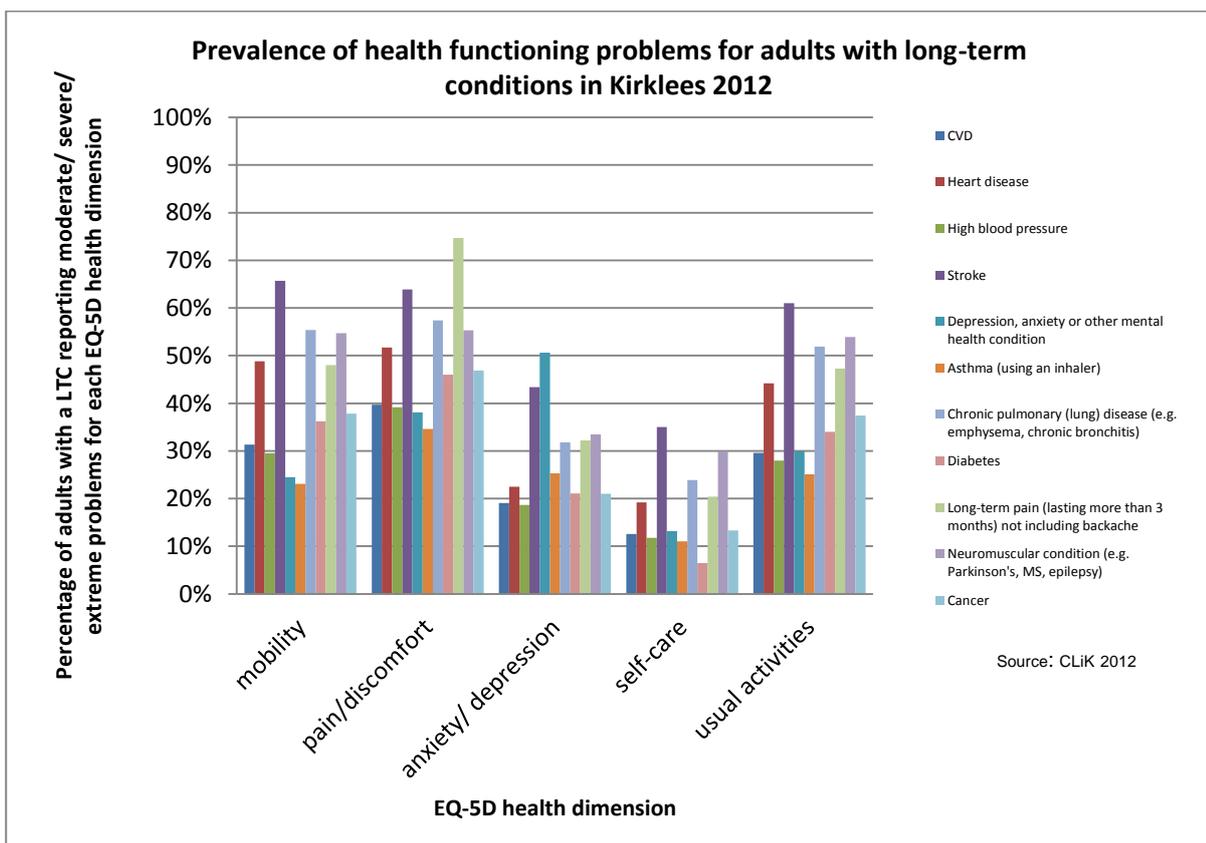
Problems with daily activities (health functioning)

Health functioning is the extent to which a person has problems with mobility, pain/discomfort, anxiety/depression, self-care and usual activities. An assessment of the prevalence of moderate/severe/extreme problems with each of these health dimensions (using the EQ-5D¹ measure) helps us to understand the impact of long-term conditions on overall health functioning. Impact is measured by combining size (the numbers affected) and severity.

This gives the following:



Depression/anxiety and pain have high impact because they affect large numbers in the population and could be better managed or detected. In comparison, those causing significant physical disability or that are progressive, such as stroke, neurological or chronic obstructive pulmonary disease (COPD) are high in terms of severity but affect smaller numbers so the effect is reduced. Those diseases with potential for good management, such as diabetes and asthma, have less impact due to that management. Depression/anxiety and pain are also the most common reasons for sickness absence from work.



In looking at all long-term conditions, stroke, neuromuscular conditions and chronic pain are most likely to be associated with problems across all aspects of health functioning. Asthma and diabetes in comparison are least likely to affect health functioning.

Not surprisingly, older people had more problems with health functioning than those of working age, except for feeling anxious or depressed. At least 1 in 3 older people had problems with mobility, pain and being able to do their usual activities.

What specific conditions are causing concern locally?

Frailty can be defined as multiple co-morbidities accumulating with increasing age leading to a gradual decline and regular exacerbations before a person's last days. In Kirklees 68% of adults had a long-term condition, more than half of these (54%) had more than one condition and 9% had four or more. Living with more than one long-term condition increases impact on personal functioning and the level of support needed.

Emotional health and wellbeing was an issue for 14-year olds in North Kirklees in 2009:

- Sleep problems due to worry had risen to 16% in 2009 from 12% in 2005. Spennings saw the biggest increase (17%) compared to Dewsbury with the least (14%).

Poor relationships can result in low confidence and self-esteem leading to a reduced sense of personal control as individuals grow-up. There was very little change for young people in 2009 compared to 2005 in that:

- 19% had no one to talk to.
- 13% were not getting on with other pupils.
- Slightly more were unhappy at school, 35% rather than 31% in 2005, especially in Dewsbury (1 in 3, 37%).
- Not getting on with family had improved from 17% in 2005 to 13%, and was lowest in Batley and Dewsbury, 1 in 10 (11%).
- Those worried about bullying remained at 8% overall. Of those being bullied 21% had been bullied in the past two months, rising from 13% in 2005, this was highest in Dewsbury affecting 1 in 4 (27%).

Obesity is associated with an increased risk of diabetes, heart disease and cancer, including earlier death. It can be prevented by reducing calorie intake and increasing physical activity levels.

"I try to walk a bit for exercise. I did join a gym but working patterns made this difficult".
(Female aged 40-49 years, Kirklees)¹

In 2012:

- 1 in 11 (9%) 4-5 year olds and 1 in 5 (20%) 10-11 year olds were obese, highest in Batley (12%) for 4-5 year olds and Dewsbury (23%) for 10-11 year olds. 1 in 10 (11%) 4-5 year olds and 1 in 10 (13%) 10-11 year olds were overweight. Batley had the lowest levels of overweight 4-5 year olds (6%) and the highest level of overweight 10-11 year olds (15%).
- Over 1 in 5 (20%) adults were obese compared to 18% in 2005, especially Dewsbury (22%). 56% of adults were at least overweight, highest in Dewsbury (58%).
- In women of childbearing age obesity rose from 15% in 2005 to 17% in 2012, especially in Dewsbury (21%). 40% were at least overweight, highest in Birstall & Birkenshaw (44%). This is linked to infant health and low birth weight babies.

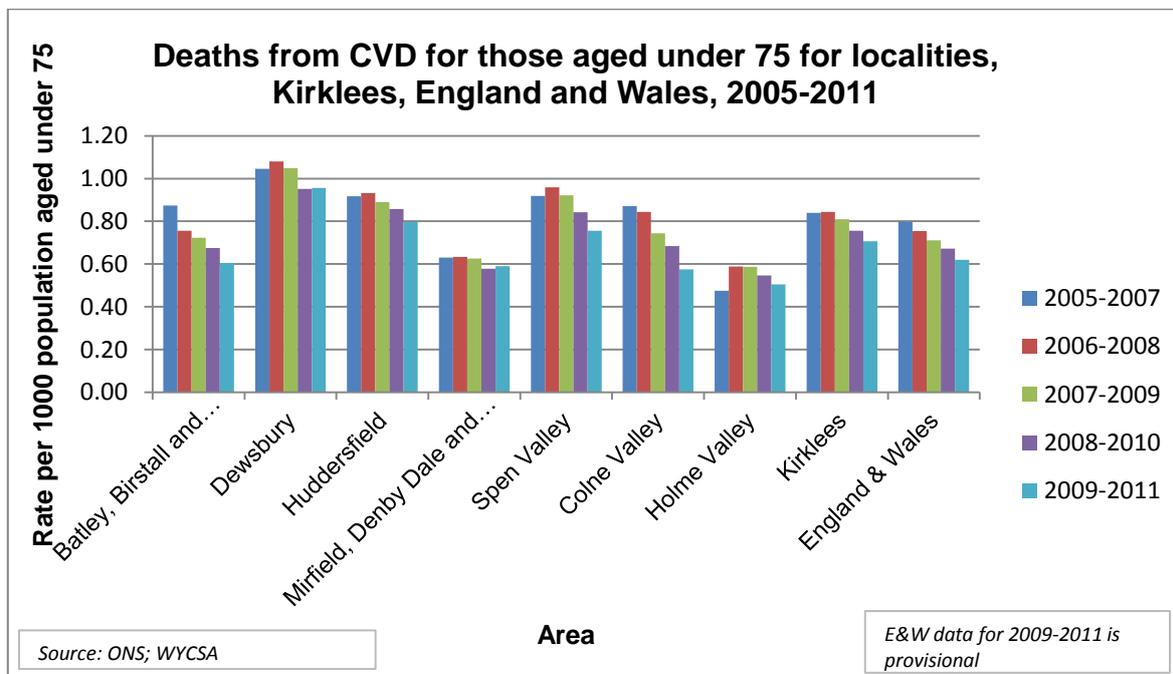
Therefore obesity is rising in adults but is static in children. This is still a concern because parents influence the lifestyles and behaviours of children so more needs to be done to reverse the trend.

“I thought what have I done [to make my child overweight]? When I came here I saw there were other mums with kids who were exactly the same, and they hadn't done anything wrong. I didn't look at them in a bad way; they weren't bad families”.

(Parent on [MEND](#) Programme Dewsbury)²

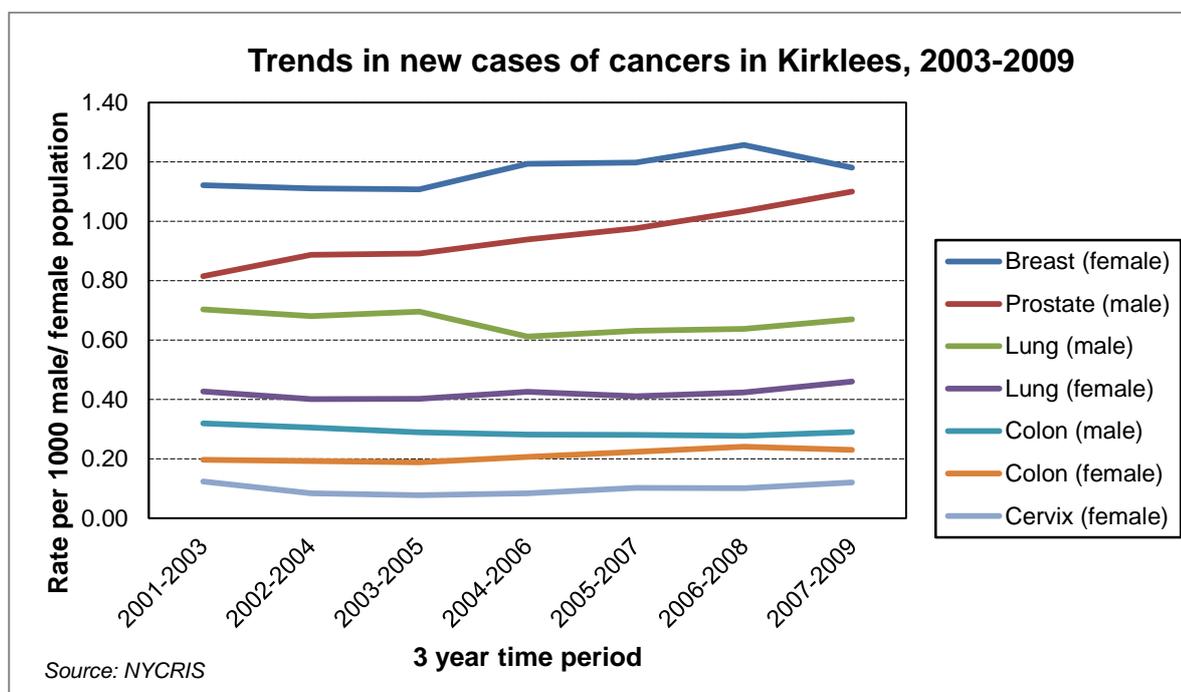
Cardiovascular disease is still the biggest cause of death nationally and locally. Most deaths are premature and can be prevented by making lifestyle changes including smoking, diet, inactivity and excess alcohol. In 2012:

- Death rates under 75 years were still higher than nationally, particularly in Dewsbury, but were reducing.
- Self-reported coronary heart disease (CHD) in North Kirklees reduced from 7.5% in 2005 to 6% in 2012 but remained higher in Birstall & Birkenshaw and Mirfield, at 7%.
- Mirfield had the most people experiencing stroke (2%). Dewsbury had the highest death rates from stroke.
- High blood pressure remained unchanged since 2005 affecting 1 in 5 (22%) adults, highest in Dewsbury (24%).



Though progress has been made to reduce deaths from cardiovascular disease more needs to be done to raise awareness and ensure early diagnosis. Particular focus needs to be on risk factors such as smoking and managing high blood pressure that remains unchanged since 2005.

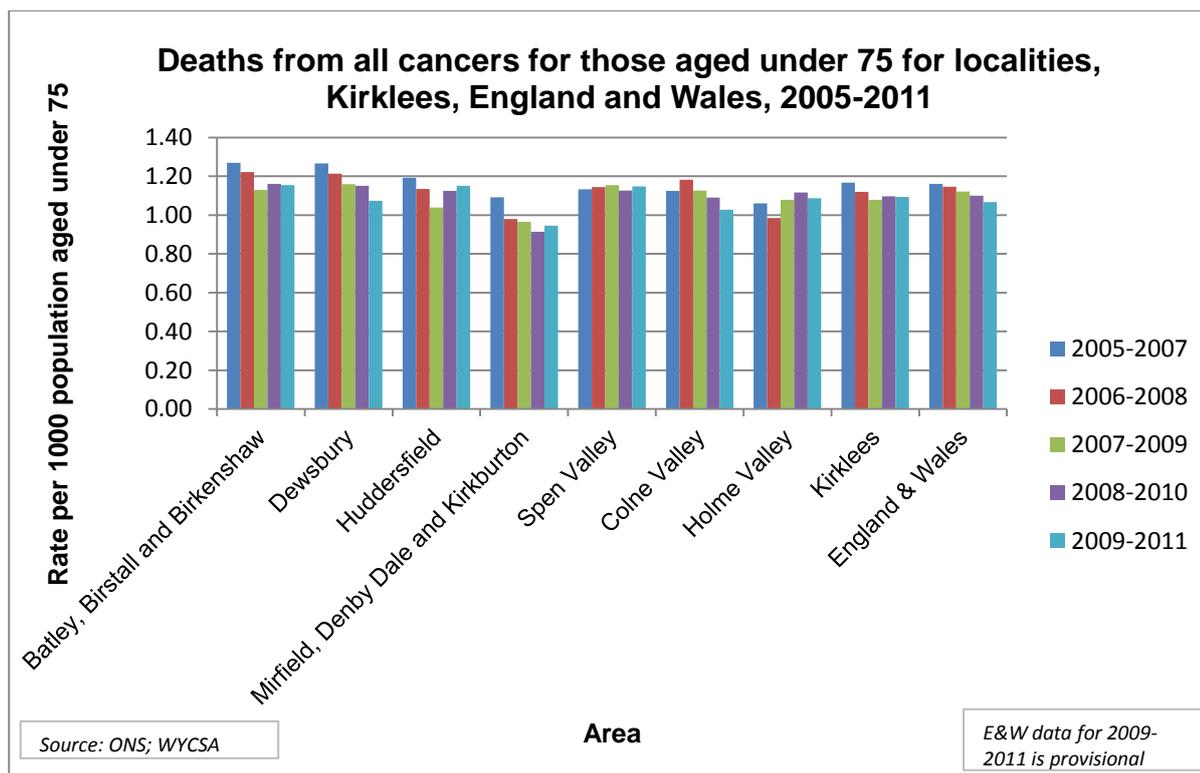
Cancer remains the most common cause of death in those aged under 75 years in Kirklees. Earlier diagnosis and appropriate treatment could reduce this.



- New cases of breast cancer (especially in Batley) and prostate cancer are increasing, possibly due to earlier recognition. Five-year survival rates for breast and prostate cancer have consistently improved since 1995, for breast the rate has

increased to 83% and 80% for prostate. Yet lung cancer survival remains consistently low at only 6.5% in 2001-05, similar to nationally, 8% in the same time period.

- Since 1997 new cases of lung cancer have increased in women and decreased in men. These rates were significantly higher than those for England. The highest rates continue to be among men aged over 65 years. However, whilst the rates in older men gradually declined, the rates in women aged over 65 years increased. This gradual convergence of lung cancer incidence rates for men and women reflects the regional and national trend.
- More men and women died from lung cancer than any other type of cancer. In Kirklees in 2008-10, 1 in 4 (25%) of all cancer deaths were from lung cancer, significantly higher than nationally. As with new diagnoses, death rates reduced in men but increased in women.
- Deaths from all cancers have reduced across Kirklees from 1.17 per 1,000 aged under 75, in 2005-07 to 1.09 in 2009-11, although not in Spenningsdale.



Therefore, fewer people are dying aged under 75 from cancers but more needs to be done regarding prevention, early awareness and diagnosis. Continued action is needed to reduce smoking levels to prevent lung cancer given once lung cancer occurs, survival is poor.

Asthma:

- Affected 1 in 5 (19%) 14-year olds in 2009, increasing slightly since 2005, highest in Birstall & Birkenshaw (24%) and lowest in Spen (17%).
- In adults asthma affected 1 in 9 (11%) in 2012 compared to 12% in 2005, higher than nationally. Dewsbury had the highest rates (13%) and Mirfield the lowest (8%).
- Key factors are smoking and physical inactivity, 1 in 5 adults (20%) and 1 in 10 (10%) 14-year olds smoked, so stop smoking support needs to be easily available.
- Mothers smoking during pregnancy and babies having a low birth weight can increase risk of asthma in childhood by 4-6 times. 32% of white women in Dewsbury and 26% in Batley smoked at delivery.

Women of childbearing age remain a key target group for stop smoking advice as does parents, not only to promote smoke-free homes but also as role models to their children in terms of adopting risky behaviours. For those with asthma good self- management skills are essential to prevent exacerbation and potential hospital admission.

Chronic obstructive pulmonary disease (COPD)*:

- Batley (16%) and Spen (10%) had the highest rate of respiratory illness requiring hospital admission in Kirklees, particularly in those aged over 65 years in Batley in 2012, while Dewsbury had the highest rate in those under 65 years (2%).
- Dewsbury also had the highest rate of deaths from COPD at 0.20 per 100,000 and Batley at 0.16 per 100,000, 0.12 per 1,000 nationally.
- COPD is linked to smoking in 4 out of 5 cases and it is therefore essential to ensure stop smoking support is easily available.
- COPD is also linked to some occupational exposures associated with mining and textiles.

* e.g. bronchitis, emphysema

Diabetes risk factors relate to genetic inheritance, unhealthy diet, lack of physical activity and obesity. The south Asian population are twice as likely to have diabetes than non-south Asian, 9.5% versus 4.3%.

- Self-reported diabetes has risen slightly from 7% in 2005 to 8%, highest in Batley (9%) and Dewsbury (8%), 6% nationally.
- People with diabetes were most likely to be obese aged under 65 years, 2 in 5 (42%) compared to 1 in 3 (33%) of those with diabetes over the age of 65 years and 20% in the North Kirklees adult population.

Long-term pain, including musculoskeletal conditions remains common. Access to proper assessment and management remains a key issue.

- 15% of adults were affected by long-term or chronic pain (not including backache).
- 16% were affected specifically by back pain (sciatica, lumbago or recurring backache), varying from 13% in Batley to approximately 20% in Birstall & Birkenshaw and Mirfield.
- Therefore 31% were affected by chronic pain (including long-term/chronic pain and recurring sciatica, lumbago or backache); which is similar to 2010 (33%).
- People with long-term pain were more likely to suffer from depression (35% in comparison to 32% with back pain and 21% in all adults).
- Nearly 1 in 4 (23%) of those with long-term pain smoked.

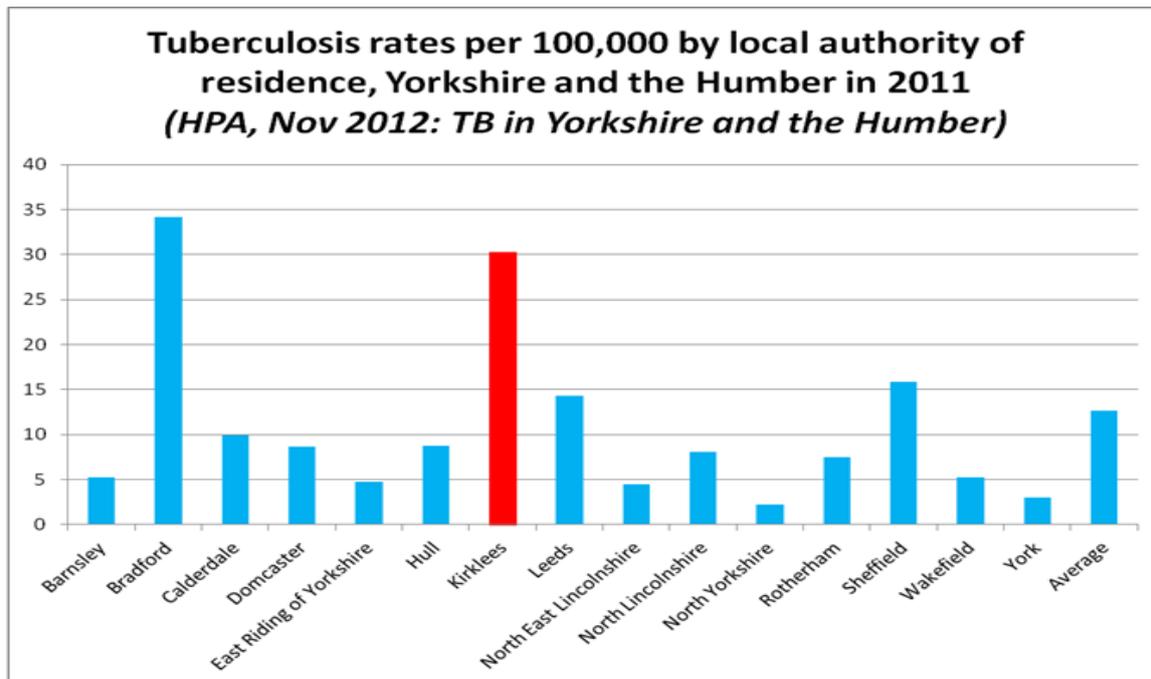
Help for both sufferers and clinicians about managing long term pain is available at www.kirkleespersistentpain.com.

Depression and anxiety:

- Levels remain the same as in 2005 affecting 1 in 5 (21%), especially in Birstall & Birkenshaw (23%) and Batley (23%).
- In comparison to individuals with other long-term conditions, those with anxiety and depression were most likely to smoke, 1 in 3 (31%).

Infectious diseases:

- Uptake of childhood immunisations is high. By the age of five, almost all children (96.7%) in Kirklees have had their first dose of MMR and 97% have had both MMR doses in 2012. This is much higher than nationally where only 88% of children have had both doses of MMR by the age of five years.
- Uptake of seasonal flu immunisation in Kirklees for 2011/2012 was 72% in those aged 65 years and over, 50% in those aged under 65 years in clinical at risk groups, and in pregnant women 47%.
- In Kirklees TB rates have continued to rise unlike elsewhere in West Yorkshire, as seen in the graph below. In 2011 the rate of TB notifications was 0.31 per 1,000 in Kirklees compared to 0.14 per 1,000 in England.



- Gonorrhoea increased by 67% between 2009 and 2011. Kirklees has the second highest rate in Yorkshire and the Humber. Although total numbers are relatively small the strong upward trend is worrying particularly in the context of antibiotic resistance in gonorrhoea infections.
- In Kirklees the number of new HIV diagnoses has continued to increase since 2000. This may reflect more and better opportunities for testing within the Kirklees area, rather than an increase in the prevalence. Early diagnosis is essential as too many cases are diagnosed too late. So raising awareness remains crucial for the public and services.

Overall infectious diseases are low because of high immunisation rates which need to be maintained. North Kirklees has specific challenges in terms of addressing rising rates of TB, sexually transmitted infections and ensuring early diagnosis of HIV.

Which health behaviours are causing concern locally?

Too many people still **smoke**:

- 1 in 10 (10%) of 14-year olds in North Kirklees smoked weekly or more in 2009, down from 13% in 2005, still higher than nationally, 8%. This was highest in Dewsbury (13%) and Batley (11%), having implications for future health including the children of those smoking.
- 14-year old smokers happy to smoke rose from 1 in 5 (20%) to 1 in 3 (33%), in 2009, especially in Spen, confirming that smoking is highly addictive and it is difficult to stop. The focus needs to be on stopping young people from starting in the

first place.

- 1 in 5 (20%) adults smoked in 2012, although this has reduced from 29% in 2005. In 2012, as in 2008, Dewsbury had the highest levels of adults smoking at 1 in 4 (24%).
- Women of childbearing age smoking rose from 1 in 5 (21%) in 2004 to 1 in 4 (23%), highest in Dewsbury, 28%. Dewsbury also had the highest number smoking at birth, 1 in 3 (32%) compared to only 17% of non-south Asian women in Kirklees overall. Maternal smoking is linked to infant risk of asthma and 1 in 3 of low birth weight babies.
- Smoking remains high in those with conditions directly related to smoking i.e. asthma (24%) and COPD (26%) compared to 16% in those with no long-term condition.

Smoking remains at the heart of many of the diseases most prevalent in North Kirklees such as cardiovascular disease, respiratory disease and cancers, especially lung cancer and infant and children's health, so needs to be a priority in terms of action to reduce its impact on population health.

"I start panicking if I haven't got one [a cigarette]. I don't know really to be honest. I'd love to stop but it's just finding it hard to stop." (Male)³

Alcohol misuse impacts on both the individual and the people around them.

- 14-year olds drinking weekly or more dropped to 1 in 5 (21%) in 2009 from 1 in 3 (30%) in 2005, still higher than nationally 18%. Least in Mirfield (19%) and Dewsbury (20%) but the highest was in Batley affecting 1 in 4 (27%), despite the high south Asian population.
- The numbers of young people having their first drink aged 9 years or less dropped markedly from 1 in 5 (22%) in 2005 to 1 in 8 (12%) in 2009, especially in Spen, 1 in 10 (10%).
- Those who drank seven or more units on a typical drinking day (binge drinking) rose slightly between 2008 and 2012 to 18% in women in Kirklees. In men, rates of binge drinking reduced from 33% to 25% across Kirklees. The binge drinking rate for North Kirklees was 22% in 2012, highest in Birstall & Birkenshaw (25%) and Spen (24%). Also 28% of women of childbearing age binge drank (and this had increased since 2008); this was highest in Dewsbury (34%) and Spen (27%).
- Of those who did binge drink only 21% of males and 18% of females were concerned about their drinking and planned to reduce it. Birstall & Birkenshaw had

the highest proportion of males (31%) and Batley had the highest proportion of females (37%) who said they were concerned about their drinking.

- 1 in 6 (16%) women of childbearing age who binge drank were concerned about their drinking and planned to reduce it. Those in Batley were most likely to report this concern (1 in 8 – 12%) and those in Spen were least likely (1 in 5 – 20%).
- Rowdiness because of drinking was perceived to be highest in Spen and Batley (34%).
- Drinking more than seven units per week was highest in those with anxiety and depression (24%) and those that were obese (26%) compared with those with no condition (23%).

Drinking at increasing risk levels is an issue which affects all of NKCCG. Binge drinking appears to be a problem across North Kirklees with Birstall & Birkenshaw and Spen reporting the highest binge drinking levels in adults overall and Birstall & Birkenshaw and Dewsbury reporting the highest binge drinking levels amongst women of childbearing age. Batley also has a problem with alcohol consumption because of drinking in 14-year olds, perceived levels of rowdiness, and lack of concern about binge drinking in women of childbearing age. Lack of concern about levels of drinking shows a lack of awareness of the risks and makes them a hard to reach group.

“Well like with binge drinking they say 14 units but I am not a binge drinker but I do drink that. A binge drinker to me is someone who drinks all the time like an alcoholic”
(Mother aged 18-25, Dewsbury)⁴

Drugs:

- 1 in 25 (4%) 14-year olds in 2009 used drugs at least monthly, unchanged since 2005 both locally and nationally. In 2012 1 in 20 (5%) reported use of drugs in the last five years. In 2011/12 the number of adults using heroin and crack cocaine fell to 1 in 125 people (0.8%).

Sexual health:

- The number of 14-year olds who had sex dropped from 1 in 7 (14%) in 2005 to 1 in 9 (11%) in 2009, highest in Birstall & Birkenshaw (13%). Of those who were sexually active 1 in 5 (20%) did not use contraception, no change from 2005.

Physical activity:

- 14-year olds doing the recommended levels of physical activity rose remarkably to 2 in 3 (67%) in 2009 compared to 1 in 3 in 2005, especially in Mirfield (77%) but least so in Batley (59%). 1 in 8 (13%) 14-year olds were sedentary – an improvement

from 23% in 2005. Again Mirfield saw the biggest reduction, 1 in 14 (7%), Batley the least, 1 in 5 (19%).

- Overall the number of adults reporting doing recommended levels of physical activity has risen to 1 in 3 (37%) in 2012 from 1 in 4 (28%) in 2005, similar to nationally 35%. The lowest numbers were in Spen (35%) where numbers were highest in 2005. Dewsbury had the highest rate (12%) never taking part in recommended levels of physical activity, compared to 11% in North Kirklees and nationally.
- Women of childbearing age remained unchanged since 2005 with 1 in 3 (35%) doing recommended levels of physical activity. This was highest in Mirfield (38%) and lowest in Birstall & Birkenshaw (31%).
- People with physically limiting conditions such as stroke, COPD and neurological conditions were more likely to report not meeting the recommended physical activity levels, 27-29%, compared to those without any such condition, 6%.

There has been a real change in Spen from being a place with the highest levels of adults being physically active in 2005 to being the lowest. More needs to be done to increase activity levels of women of childbearing age.

“It is just convenience [using the car]...the quicker you get there, the quicker you can get back and when you have got lots to do” (Mother aged 18-25, Dewsbury)⁵

Food:

- Overall 62% of those in North Kirklees were likely to consume 5-a-day. People in more affluent areas are more likely to eat 5 a day: Mirfield and Birstall & Birkenshaw (68%) than Dewsbury (57%).
- Eating takeaways was higher in Dewsbury and Spen, 1 in 4 (23%) compared to 1 in 8 (13%) in Mirfield.
- Most people were confident cooking from basic ingredients, between 81-88%. Half cooked from basic ingredients five times a week or more with little difference across localities.
- Of women of childbearing age, 59% were likely to eat 5 a day, 24% eat fast food or takeaways at least once a week and only 49% cooked from basic ingredients although 88% felt confident doing it. This is an important target group especially given their influence over the family.

“We have a lot of margarine, butter, ghee. Rice you have to put ghee in don't you? The way we boil rice” (BME mother, Batley)⁶

What is affecting vulnerable groups or communities in North Kirklees?

Young carers were more likely to experience bullying and be unhappy at school.

- 1 in 5 (22%) 14-year olds in Dewsbury cared for a parent/sibling/other relative with a disability or illness, higher than the 1 in 5 (17%) in North Kirklees and Kirklees overall (12%).
- 1 in 5 (19%) of the adult population in Kirklees are **carers**. This will increase as the population live longer and changes are made to social care provision for those with higher care needs. Adult carers are more likely to have poorer health, especially pain and depression, than non-carers.

Children in 2012:

- In Kirklees, 2 in 3 domestic abuse referrals had children resident in the home.
- North Kirklees had a slightly higher rate locally of children subject to a child protection plan or “looked after”. The number of **looked after children** (LAC) in Kirklees has increased by 92% since 2006 to 640 in March 2012 (this could be due to better identification locally of those at risk).

The home environment and parental behaviours can increase the vulnerabilities of some children. Children in the care system are clearly more vulnerable to poor outcomes.

- 3% of children have a statement of special educational needs; the rate is twice as high in boys as girls. There is a higher rate of deaths and **long-term disability in children** of Pakistani origin, particularly from congenital abnormalities which are linked to infant deaths. Dewsbury (3.2%) had the highest level of children with special educational needs.
- About 1 in 3 of all children with congenital abnormalities die before five years of age and many survivors experience chronic disability and are cared for with support from specialist community paediatric services.

People with learning disabilities, in 2012:

There are an estimated 7,500 to 8,200 adults with a learning disability living in Kirklees, of which 1,530 are known to Kirklees Council adult social care services. The rate of learning disabled adults is higher in younger non-white groups, especially in south Asian communities. Of those known to Kirklees Council adult social care services 4 in 5 (83%) are white, which broadly reflects the Kirklees population. However, within the 18-24 year old age group 1 in 4 (25%) are from a minority ethnic background. The rise has been greatest in Dewsbury (including Mirfield), 18% in 2011 to 20% in 2012.

Which wider factors are most relevant to North Kirklees?

Low income

“All the junk food is cheap and all healthy food is expensive”

(Female aged 18-25, no children, Spen Valley)⁷

In 2012:

- Children living in income deprived households dropped slightly from 1 in 4 (23%) in 2005 to 22%, similar to nationally, 21%.
- 1 in 4 (27%) adults had money worries in the past weeks/all the time, especially in Dewsbury where it affected 1 in 3 (32%).
- Half of those over the age of 65 years in Batley (47%) and 2 in 5 (45%) in Dewsbury (45%) were classified as being in poverty, nearly double the national average, 1 in 4, and 1 in 5 (20%) in Mirfield.

Low income is linked to poorer health and vice versa. The relationship is a graded one. So life expectancy is increasing but the number of disability free years someone can expect to live decreases the more deprived they are. Older people are a particular concern in North Kirklees because there are nearly double the proportion living in poverty than nationally.

Employment in 2012:

- 1 in 4 (25%) had no qualifications, rising to 2 in 5 in Batley and Dewsbury (40%).
- Slightly more were in routine and manual work in Batley (1 in 4, 29%) compared to North Kirklees as a whole at 25%.
- The most common reasons for being absent from work due to illness are problems relating to musculoskeletal problems, affecting 1 in 3 (31%). Of those 71% had problems with pain, 46% had problems with mobility and 21% had problems with washing or dressing themselves.
- Across Kirklees, 1 in 14 (7%) working-age residents (nearly 18,000 people) claim Employment Support Allowance/Incapacity Benefit. In Dewsbury East and West, rates are more than 10%.

Employment is a key component of wellbeing and can be the best route out of poverty, so overall is highly beneficial for health.

“I think people our age just want to make money, they need jobs. But there’s no opportunity... That’s why, because the opportunities aren’t there they end up going on different ways, and because no one to guide them, they get guided by

the wrong people and they end up doing stuff they don't want to do.”

(Young offender aged 18-24 years, Kirklees)⁸

Housing in 2012:

- 1 in 6 (17%) households in North Kirklees reported living in houses that were not suitable for their needs, highest in Batley affecting 1 in 5 (21%) households.
- Overcrowding remained unchanged since 2005, highest in Batley affecting 1 in 8 (13%).
- 1 in 3 (28%) households were badly in need of repairs/improvements, similar to nationally, 26%. Birstall & Birkenshaw had the highest number of households affected, 35%.

The quality of housing has a significant impact on physical and mental wellbeing.

Educational attainment (varied by gender, ethnicity and levels of deprivation) in 2012:

- There has been a statistically significant improvement in the number of pupils who achieved five or more GCSE grades A*-C from 42% in 2005 to 60%, higher than nationally (59%), with Dewsbury at 53% versus 38% in 2005.
- Girls did better than boys, 62% compared to 59%.
- There was wide variation across Kirklees for Asian Pakistani heritage pupils. 67% of Asian Pakistani pupils in Mirfield achieved five or more A*-C GCSEs, including English and maths, compared with 41% in Dewsbury.

Crime in 2012:

- Car crime dropped from 17 per 1,000 in 2005 to 10 per 1,000.
- Household burglary rose three-fold from 6.5 per 1,000 to 16 per 1,000.
- Overall crime reported to police dropped from 112 per 1,000 in 2005 to 77 per 1,000.

Social capital in 2012:

- People were least likely to volunteer in Spen (18%) and Batley (17%) versus 19% across Kirklees.
- 83% felt they had someone to comfort them when upset, lowest in Dewsbury, 80%.
- For people of different ethnic groups getting along was least likely to occur in areas where there was the lowest proportion of ethnic groups i.e. Birstall & Birkenshaw (30%) and in Mirfield (27%), highest in Batley (47%) where there was the highest number of south Asians.

- Similarly, for people of different ages getting along together was least likely in Batley (56%) and Dewsbury (55%) where the proportion of elderly is lowest and highest in Birstall & Birkenshaw (64%) and Mirfield (65%).
- People trusted each other least in Dewsbury (35%) and Batley (36%) and most in Mirfield (46%).
- People were most satisfied with the place they live in Birstall & Birkenshaw (83%) and Mirfield (83%), least in Dewsbury (55%) and Batley (68%).

“I don’t get on with half the people really. No matter how much people say they are your mates, unless you have grown up with them, they’re not, you know what I mean”.
 (Young offender aged 18-24 years, Kirklees)⁹

Although North Kirklees is more deprived than elsewhere, possibly even a greater factor impacting on local health is the lower levels of social pride and trust felt in the North Kirklees communities, particularly in Dewsbury and Batley. This affects local people by increasing stress and thus increasing risk of ill health and disease.

What could the CCG and other commissioners and service planners consider?

Focus on the key causes of local ill health that commissioners can address:

- Smoking, especially in women.
- Increase levels of physical activity and healthy diets locally.
- Promote awareness of the early signs of disease management, cancers especially.
- Signpost people to relevant sources of help e.g. websites such as Connect to Support, self-care, etc.
- Treat people promptly using coherent care guidance.
- Embed the service changes from the Joint Health and Wellbeing Strategy (JHWS) in-service redesign as well as use the details of the JSNA to inform the needs to be addressed.

Date this section was last reviewed

24/07/2013

Quotes added 6/9/13

Sources of quotes:

¹ Kirklees PCT (2008). A Qualitative Insight into Obesity Adult Target Group. Enventure

² Report Prepared for: Kirklees PCT A Qualitative Insight into Obesity Children's Service Users. 2008. Enventure

³ NHS Kirklees (2008) Smoking in Kirklees (Young People and R&M workers) Prepared by Accent

⁴ Kirklees Partnership (2008) 'Exploratory Research into Health of Women of Child Bearing Age. Prepared by 20/20 Research Limited, Sheffield

⁵ Kirklees Partnership (2008) 'Exploratory Research into Health of Women of Child Bearing Age. Prepared by 20/20 Research Limited, Sheffield.

⁶ Kirklees Partnership (2008) 'Exploratory Research into Health of Women of Child Bearing Age. Prepared by 20/20 Research Limited, Sheffield.

⁷ Kirklees Partnership (2008) 'Exploratory Research into Health of Women of Child Bearing Age. Prepared by 20/20 Research Limited, Sheffield.

⁸ Kirklees Council and NHS Kirklees (2011) Report no. 7. CLiK Qualitative Research; Young Offenders (18 – 24 year olds). Prepared by Information by Design.

⁹ Kirklees Council and NHS Kirklees (2011) Report no. 7. CLiK Qualitative Research; Young Offenders (18 – 24 year olds). Prepared by Information by Design.