

Income and deprivation

Headlines

Deprivation kills – Dewsbury people can expect to live 3.6(men) to 4.9(women) years less than Holme Valley people. A wide range of factors combines to produce this effect; income, employment, health and disability, education, skills and training, barriers to housing and services, crime and the living environment.

Kirklees is one of the 50 most deprived local authorities in England in terms of income and employment. Comparatively Kirklees improved in employment, crime and barriers to services, but worsened in education, income, skills and training.

Across Kirklees 1 in 4 (24%) children and 1 in 5 (21%) older people are income deprived (i.e. living in a household receiving a low income related benefit). There are income deprived residents in every locality, but Dewsbury has the highest rates of children (34%) and older people (31%).

Why is this issue important?

Deprivation is directly linked to life expectancy and the length of disability free life. Nationally, the gap in life expectancy between people living in the lowest and highest income neighbourhoods is six years, and the gap in disability free life expectancy is 13 years^{1 (p16)}.

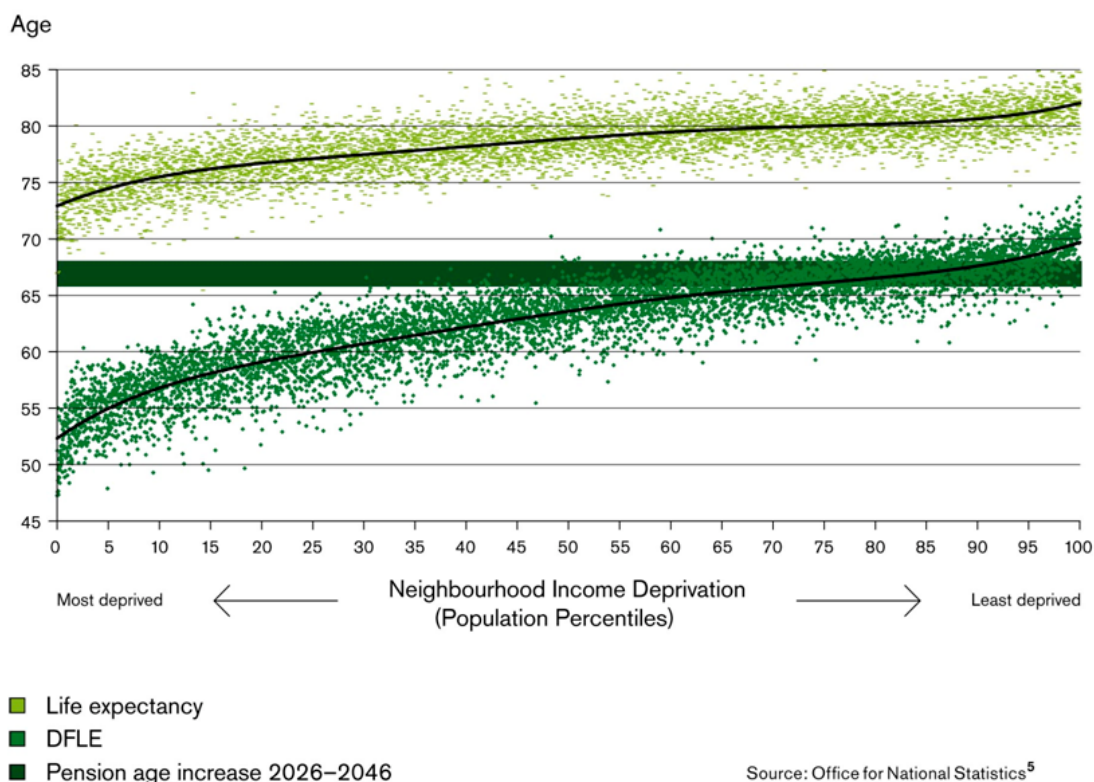
This also shows that the poorest have 18 years less disability free years than the most affluent. Given that the pension age is increasing, this means that the poorest will spend the last 15 years of their working life with some disability and the most affluent with none. The most affluent will have about 12 years of disability compared to over 20 for the poorest.

Locally this is highlighted by the gap in life expectancy between Dewsbury and the Holme Valley of 4.9 years for men and 3.6 years for women (see population section).

The gap in income between communities living in the same area, region or country profoundly affects the gap in life expectancy. So, it is not being poor per se that matters so much in western societies as being comparatively poor. This relates to expectations, comparative struggle and sense of control^{1 (p18)}.

The Index of Deprivation (ID) 2007² identified Kirklees as one of the 50 most deprived local authorities in England for both the income and employment domains, the same as in 2004. More than 70,000 people were classed as income deprived, about 1 in 6. Kirklees ranks worse than in 2004, going from 21st worst to 12th worst in England.

Figure 1 Life expectancy and disability-free life expectancy (DFLE) at birth, persons by neighbourhood income level, England, 1999–2003

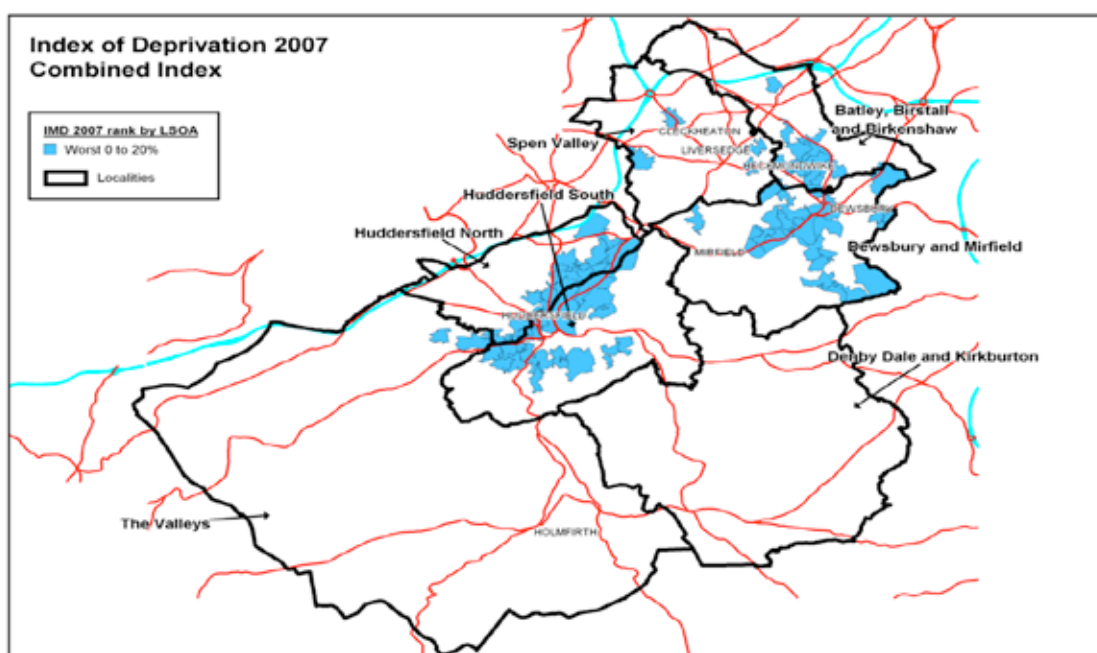


More deprived areas of Kirklees were generally within the urban areas of Huddersfield and Dewsbury with a few pockets of deprivation within the north of Kirklees. More than 1 in 4 (27% -106,182 people) of the Kirklees population live in the top 20% of most deprived areas, nationally. This includes 1 in 4 (25% - 20,486 children) children aged 0-15 and 1 in 5 (21% -14,416 people) people aged over 65 years.

Overall the concentration of deprivation, i.e. the number of local super output areas (LSOAs) in the worst 10% nationally, was higher than expected in Kirklees. However, there are domains in which Kirklees scores as well as or better than expected, including health and disability, employment, barriers to services and crime with the last two improved since 2004. The domains that were worse than expected include education, skills and training and income, which had significantly worsened since 2004.

What significant factors are affecting this issue?

Deprivation is influenced by, and in turn affects, many things. Most of the issues covered in this JSNA have some relationship with deprivation, either in contributing to the issue, leading to the issue or making an issue worse than it would otherwise be. Deprivation is a complex topic and of itself cannot be easily addressed locally. However many of the factors that contribute to it can be influenced and the JSNA tries to identify these where they are an issue and can be changed locally.



These comparisons were national ones so improvements could be a result of Kirklees getting better or other areas becoming worse and making Kirklees appear better overall, and vice versa.

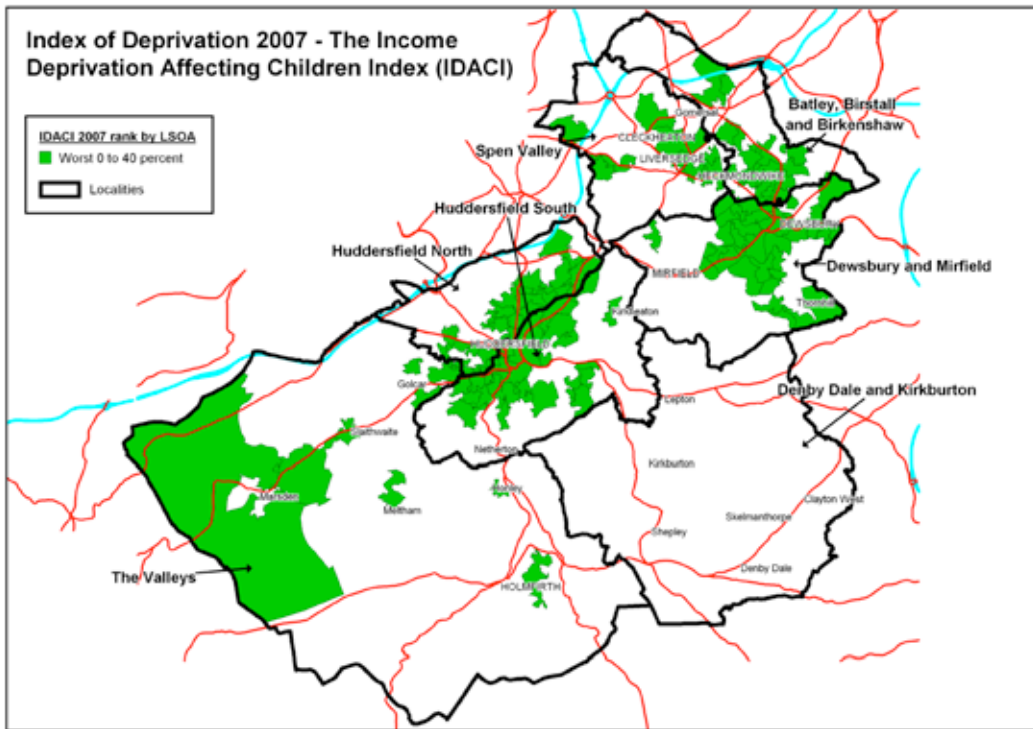
There was a significant concentration of deprivation in the urban areas of Huddersfield and Dewsbury with a few pockets of deprivation within the north of Kirklees. Since 2004, the most significant improvements have been in parts of Batley and Thornhill. There were also some small areas that became worse. These were split between the central areas of Dewsbury and Huddersfield. Although it is important to note that the ID is based on the relative position of areas, these changes might be due to other areas getting worse/better, rather than the absolute experience of local people changing.

Which groups are affected most by this issue?

Children

Across Kirklees 1 in 4 (24%) children aged 0-15 years were living in income deprived households (defined by the Income Deprivation Affecting Children Index - IDACI). So deprivation directly affected 18,967 children.

Income deprivation affecting children had a similar pattern to the levels of deprivation facing the whole population. The Kirklees localities that were amongst the top 20% levels of child deprivation nationally were Dewsbury (34% aged 0-15 population - 4,655 children) and Huddersfield (30% aged 0-15 population - 7,199 children).

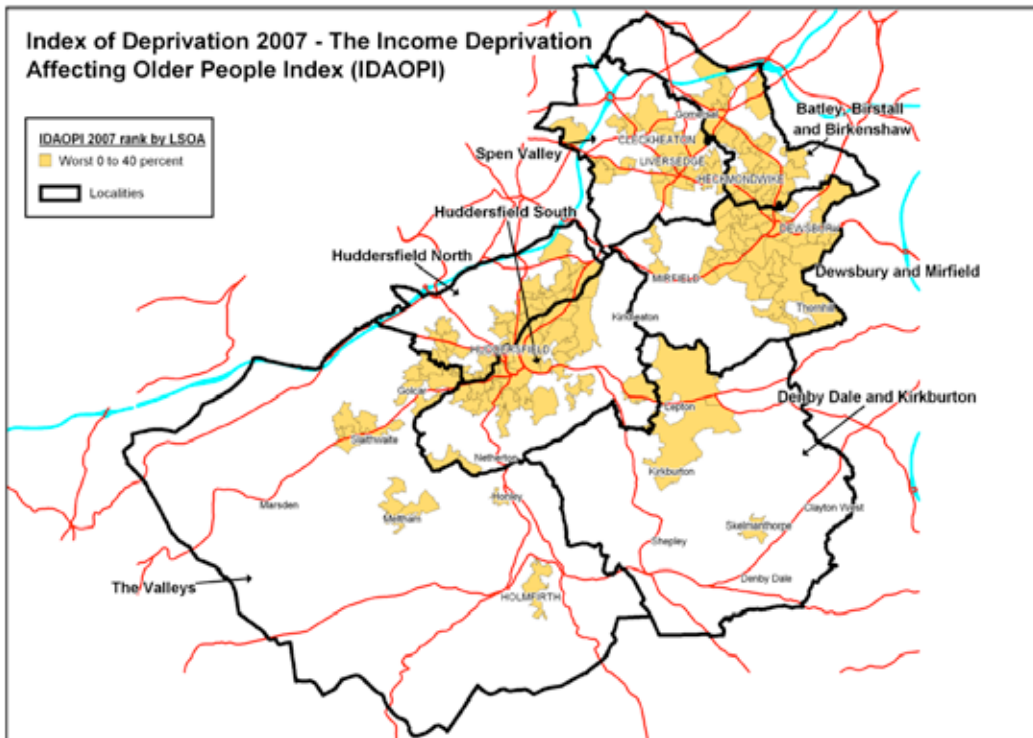


Older people

In Kirklees 1 in 5 (21%) older people, i.e. aged 60 years and over, were income deprived (defined by the Income Deprivation Affecting Older People Index - IDAOP), a total of 18,506 people.

Income deprivation affecting older people also had a similar pattern to the levels of deprivation facing the whole population.

Huddersfield (22% - 6,110), Dewsbury (31% - 3,073 people) and Batley, Birstall & Birkenshaw (26% - 2,632 people) had the worst level of income deprivation affecting older people and were amongst the worst 20% nationally. Figure 3 shows that when looking at the areas that fall into the worst 40% deprived nationally, this also extends to more peripheral areas in Kirklees, for example parts of Denby Dale & Kirkburton.



Where is this causing greatest concern?

Dewsbury and Mirfield had the highest concentrations with 46% (33,677 people) living in areas within the 20% most deprived areas nationally, followed by Batley, Birstall & Birkenshaw (38% - 19,712 people) and Huddersfield south (37% - 24,609 people). Denby Dale & Kirkburton had a greater concentration of population within the least deprived nationally closely followed by The Valleys.

What could commissioners and service planners consider?

- As Kirklees' position relative to other areas is worsening across the education, income, skills and training domains, these should be a particular focus for action. The geographical communities experiencing very high levels of deprivation across the range of domains require co-ordinated and concerted action across the range of issues, and the design and delivery of those actions must actively engage those local people.
- Income deprivation is a day-to-day reality for many people across Kirklees, action should focus on those who are most affected, i.e. children, adults who are ill or disabled and older people, recognising that work is the best route out of poverty but is not an option for everyone.
- Local action should also seek to reduce the relative levels of deprivation across Kirklees, not just enable the worst off or those living in the worst areas to improve.

References

1. Marmot, M. *Fair Society, Healthy Lives: Strategic Review of Health Inequalities in England post 2010*. 2010.
<http://www.marmot-review.org.uk/>
2. *Indices of Deprivation*.
<http://www.communities.gov.uk/documents/communities/pdf/733520.pdf>

Note²

The Index of Deprivation 2007 (ID 2007) is a ranked measure consisting of seven domains all of which combine a number of individual indicators, 38 in total. The domains cover income, employment, health and disability, education, skills and training, barriers to housing and services, crime and the living environment. The ID 2007 is measured at local authority level and lower super output area, so that areas of relative deprivation can be identified within an authority. Most of the data underpinning the index is from 2005. The domains are weighted, with income and employment accounting for 23% each, health and education 14% and the other domains 9%. More detail is available at

<http://www.communities.gov.uk/documents/communities/pdf/733520.pdf>

Some of the indicators used in the income domain are also included in two supplementary indices:

Income Deprivation Affecting Children Index (IDACI). This covers only children aged 0-15 years living in income deprived households (defined as either households receiving income support/job seekers' allowance, income based pension credit or those not in receipt of these benefits but in receipt of working tax credit/child tax credit with an equivalent income below 60% of the national median before housing costs). The IDACI is the proportion of children aged 0-15 years living in such households as a proportion of all children aged 0-15 years.

Income Deprivation Affecting Older People Index (IDAOPI). This index represents income deprivation affecting older people defined as those adults aged 60 years or over living in pension credit (guarantee) households as a proportion of all those aged 60 years or over.

NB: Both the IDACI and IDAOPI are from the overall index as they are not relative measures, but an actual measure of the percentage of children or older people living in an area who are income deprived.