

Walsall JSNA

Chapter 3 – Adult Wellbeing

Contents

3.1 Adult Obesity

3.2 Physical Activity

3.3 Tobacco Control & Smoking Cessation

3.4 Drugs and Alcohol

3.5 Making Connections

Appendix

Introduction

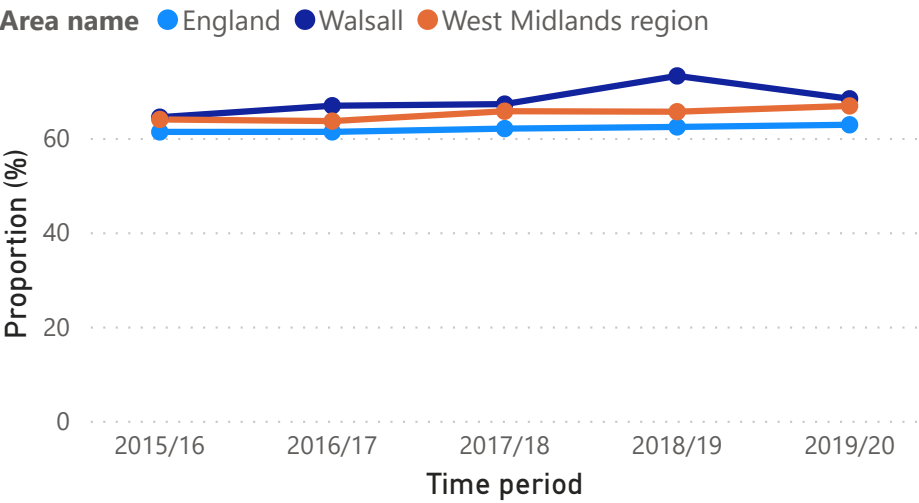
Tackling obesity is one of the greatest long-term health challenges currently faced in England. Around two-thirds (63%) of adults are above a healthy weight, and of these half are living with obesity.

Obesity is associated with reduced life expectancy and a range of health conditions including type 2 diabetes, cardiovascular disease, liver and respiratory disease and cancer. Obesity can also have an impact on mental health. Obesity prevalence is highest amongst the most deprived groups in society.

Interpretation

As of 2019/20, over 68% of Walsall's adults are considered overweight, which is significantly higher than England, but statistically similar to the West Midlands region. The margin between Walsall and England has reduced during the most recent period, but note that these statistics are based on the Active Lives survey conducted by Sport England (please see Methodology section for more information around the data collection)

Percentage of adults (aged 18+) classified as overweight or obese



Time period	Value(%)	LowerCI95%	UpperCI95%
2015/16	64.4	61.1	67.8
2016/17	66.8	63.3	70.4
2017/18	67.2	62.5	71.7
2018/19	73.2	68.5	77.7
2019/20	68.3	63.6	72.9

Source: Public Health England. Public Health Profiles. [Date accessed: 2nd Sep 2021] <https://fingertips.phe.org.uk> © Crown copyright [2021]

Methodology around data collection and analysis

Questions on self-reported height and weight are included in the Active Lives survey to provide data for monitoring excess weight in adults at local authority level for the Public Health Outcomes Framework (PHOF).

It is known that adults tend to underestimate their weight and overestimate their height when providing self-reported measurements and the extent to which this occurs can differ between population groups. Therefore prevalence of excess weight (overweight including obese) calculated from self-reported data is likely to produce lower estimates than prevalence calculated from measured data.

Differences between self-reported and measured height and weight vary in a systematic way, primarily as a function of age and sex. This systematic variation can be described by formulas which may be used to adjust self-reported height and weight measurements at an individual level to give likely actual height and weight.

Active Lives self-reported height and weight have been adjusted at individual level using formulas estimated with Health Survey for England (HSE) data from 2012 to 2014. HSE collects data on both self-report and measured height and weight from the same individuals and this allows adjustment formulas to be estimated.

The prevalences are weighted to be representative of the whole population at each level of geography. They have also been age-standardised to improve comparability of excess weight prevalence between Local Authorities.

Introduction

Physical inactivity is the 4th leading risk factor for global mortality accounting for 6% of deaths globally. People who have a physically active lifestyle have a 20-35% lower risk of cardiovascular disease, coronary heart disease and stroke compared to those who have a sedentary lifestyle. Regular physical activity is also associated with a reduced risk of diabetes, obesity, osteoporosis and colon/breast cancer and with improved mental health. In older adults physical activity is associated with increased functional capacities. The estimated direct cost of physical inactivity to the NHS across the UK is over £0.9 billion per year.

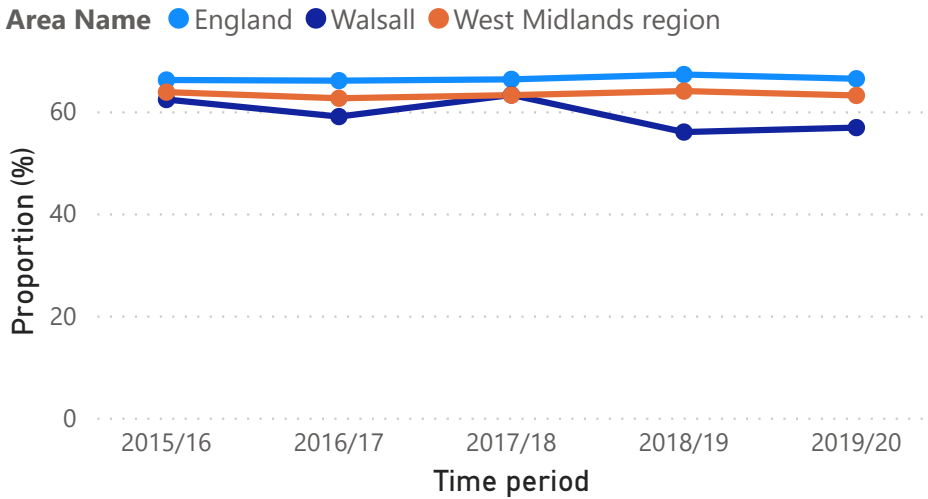
Data source

These indicators are presented by Public Health England and are based on the Active Lives Adult Survey, Sport England.

The latest update presents data from Active Lives Adult Survey for the period mid-November to mid-November.

Note: the inactive adults indicator is not the inverse of active adults - please see the definitions for further information.

Percentage of physically active adults (ages 19+)



Time period	Value(%)	LowerCI95%	UpperCI95%
2015/16	62.3	59.2	65.3
2016/17	59.0	55.7	62.1
2017/18	63.2	58.8	67.4
2018/19	55.9	51.3	60.4
2019/20	56.8	52.3	61.2

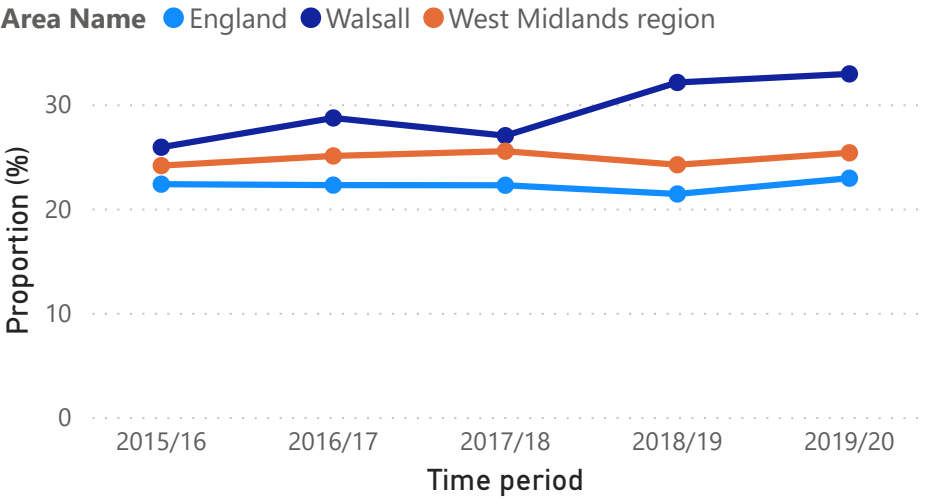
Definition: Physically active adults

The number of respondents aged 19 and over, with valid responses to questions on physical activity, doing at least 150 moderate intensity equivalent (MIE) minutes physical activity per week in bouts of 10 minutes or more in the previous 28 days expressed as a percentage of the total number of respondents aged 19 and over.

Interpretation

The results of the two most recent surveys show that Walsall adults are significantly less active than the West Midlands region and England. Analysing Public Health England's Fingertips show that this is also the case for all our Black Country neighbouring authorities.

Percentage of physically inactive adults (aged 19+)



Time period	Value(%)	LowerCI95%	UpperCI95%
2015/16	25.9	23.2	28.7
2016/17	28.7	25.8	31.7
2017/18	27.0	23.2	31.1
2018/19	32.1	28.0	36.5
2019/20	32.9	28.8	37.2

Definition: Physically inactive adults

The number of respondents aged 19 and over, with valid responses to questions on physical activity, doing less than 30 moderate intensity equivalent (MIE) minutes physical activity per week in bouts of 10 minutes or more in the previous 28 days expressed as a percentage of the total number of respondents aged 19 and over.

Interpretation

The five most recent surveys show that Walsall's adults have been consistently significantly more inactive than England's sampled population. The margin between the two are also currently increasing and the most recent data shows almost a third of Walsall's adults are categorised inactive.

Introduction

Smoking is the most important cause of preventable ill health and premature mortality in the UK. Smoking is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. It is also associated with cancers in other organs, including lip, mouth, throat, bladder, kidney, stomach, liver and cervix.

Smoking is a modifiable behavioural risk factor and effective tobacco control measures can reduce the prevalence of smoking in the population.

Smoking during pregnancy

Smoking during pregnancy can cause serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, stillbirth, low birth-weight and sudden unexpected death in infancy.

Encouraging pregnant women to stop smoking during pregnancy may also help them kick the habit for good, and thus provide health benefits for the mother and reduce exposure to secondhand smoke by the infant.

Smoking cessation service

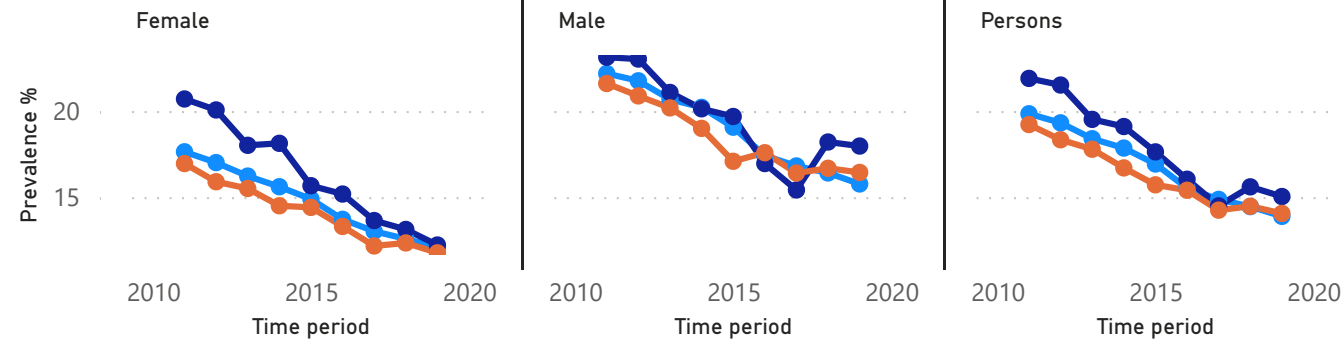
Walsall currently provide a community as well as specialist maternity stop smoking service for people who live, work or have a registered GP in the borough.

A single point of access is provided by One You Walsall, who are contactable via:

Telephone: 01922 444044

Smoking prevalence in adults (18+) : current smokers

Area Name England Walsall West Midlands region



Walsall's prevalence (%)

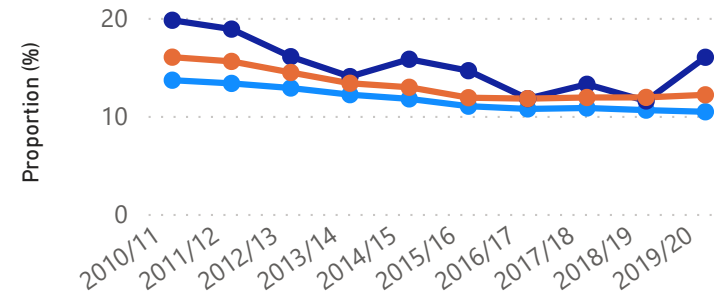
Time period	Female	Male	Persons
2011	20.7	23.1	21.9
2012	20.1	23.0	21.5
2013	18.0	21.1	19.5
2014	18.1	20.1	19.1
2015	15.7	19.7	17.6
2016	15.2	16.9	16.0
2017	13.6	15.4	14.5
2018	13.1	18.2	15.6
2019	12.2	18.0	15.0

Data source for this prevalence indicator is the Annual Population Survey (APS).

In general, Walsall's prevalence has seen a reducing trend in recent years, following the regional and national patterns. Self-reported prevalence for males however remains consistently higher than females, in Walsall and compared with its comparators.

Smoking status at time of delivery (SATOD)

Area Name England Walsall West Midlands region



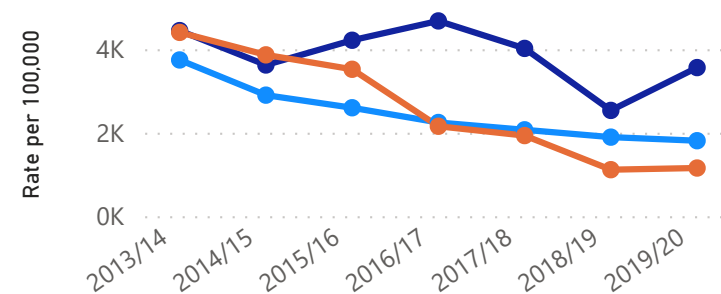
Time period	SATOD%	LowerCI95%	UpperCI95%
2010/11	19.8	18.5	21.1
2011/12	18.8	17.6	20.2
2012/13	16.0	14.8	17.3
2013/14	14.0	12.9	15.2
2014/15	15.8	14.6	17.1
2015/16	14.6	13.4	15.9
2016/17	11.8	10.7	12.9
2017/18	13.2	12.1	14.4
2018/19	11.5	10.5	12.7
2019/20	16.0	14.8	17.2

Calculated by PHE from the NHS Digital return on Smoking Status At Time of delivery (SATOD).

Walsall's SATOD reduction has been encouraging over the past 10 years, although in the most recent reported year of 2019/20, there has been a statistically significant increase from almost 12% to 16%.

Smokers (aged 16+) that have successfully quit at 4 weeks

Area Name England Walsall West Midlands region



Time period	Quits (n)	Rate (per 100k)	LowerCI95%	UpperCI95%
2013/14	1,867	4,446	3,929	5,029
2014/15	1,498	3,622	3,193	4,120
2015/16	1,616	4,215	3,701	4,803
2016/17	1,648	4,678	4,055	5,407
2017/18	1,287	4,020	3,461	4,688
2018/19	878	2,535	2,182	2,943
2019/20	1,196	3,560	3,074	4,139

The quit rate is calculated by dividing the number of smoking quits by (estimated) smoking population, multiplied by 100,000. This information is collected from Local Authority Stop Smoking returns in line with requirements from the Department of Health.

Since the smoking cessation service move over to the Local Authority in April 2013, Walsall's 4 week quit rate has been significantly higher than England.

Introduction to the indicators

The main 3 main indicators are included in PHE's Public Health Outcome Framework (PHOF) and cover opiate, non-opiate and alcohol for adults receiving structured treatment.

Individuals achieving this outcome for for these substances demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health. In addition, for alcohol, it will also reduce the harms to others caused by dependent drinking.

It aligns with the ambition of both public health and the Government's drug strategy of increasing the number of individuals recovering from addiction. It also aligns well with the reducing re-offending outcome, as offending behaviour is closely linked to substance use and it is well demonstrated that cessation of drug and alcohol use reduces re-offending significantly. This in turn will have benefits to a range of wider services and will address those who cause the most harm in local communities.

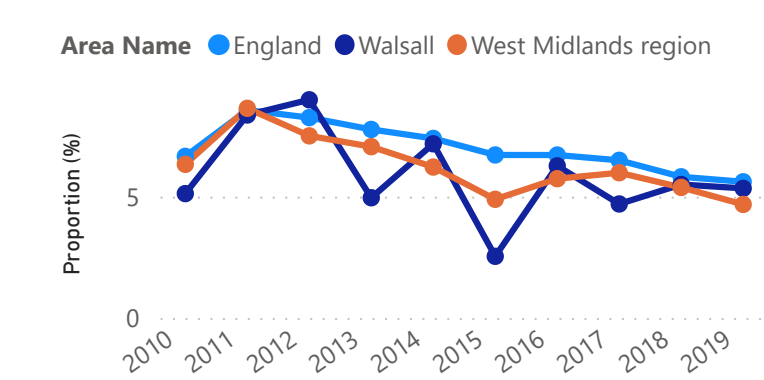
The local service

The Beacon (Change, Grow, Live; CGL) provide the local drug and alcohol service and they can help with reducing or stopping drugs or alcohol use. Advice can also be given around staying safe and healthy. For those who inject, there is a free needle exchange service and a facility to get tested for blood borne viruses. As well as the adult service, there is also support for young people (aged 10 - 18) from the dedicated young people's team.

Contact details and further information about the service is available at the website:

<https://www.changegrowlive.org/the-beacon-walsall/>

Successful completion of drug treatment - opiate users



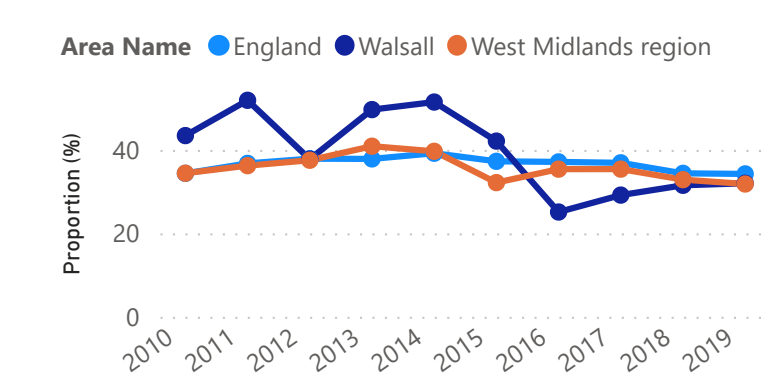
Time period	Value%	LowerCI95%	UpperCI95%
2010	5.1	4.0	6.5
2011	8.4	6.9	10.1
2012	9.0	7.4	10.8
2013	5.0	3.8	6.4
2014	7.2	5.8	8.9
2015	2.5	1.8	3.6
2016	6.3	5.0	7.9
2017	4.7	3.6	6.2
2018	5.5	4.2	7.1
2019	5.3	4.1	7.0

Since the drug and alcohol service were transferred to the local authority in 2013, Walsall's opiate successful completions has been lower than England. The gap between the two however has reduced considerably since 2018, with Walsall's indicator now being statistically similar to the West Midlands and England.

Walsall is estimated to have a proportionally higher prevalence of opiate and crack cocaine (OCU) use compared to the West Midlands region and England (2), implying a more complex local demand.

Note: a successful completion is defined as a user exiting the treatment service (and being non-dependant) who do not re-present to treatment again within 6 months.

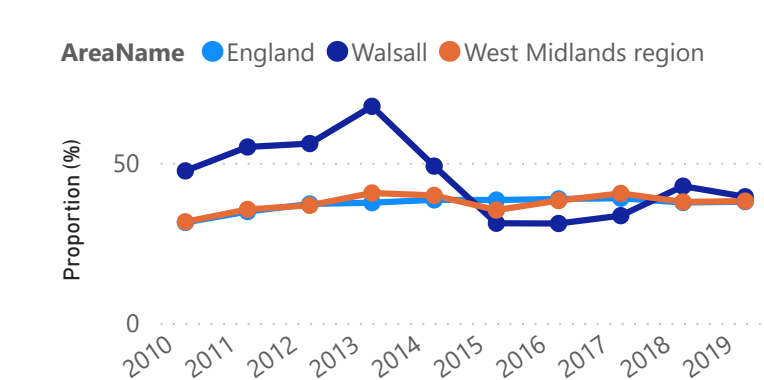
Successful completion of drug treatment - non-opiate users



Time period	Value%	LowerCI95%	UpperCI95%
2010	43.4	37.4	49.6
2011	51.9	45.2	58.5
2012	37.8	31.0	45.0
2013	49.7	43.9	55.4
2014	51.5	45.9	57.0
2015	42.1	36.1	48.3
2016	25.1	19.9	31.2
2017	29.2	24.2	34.7
2018	31.5	26.1	37.4
2019	32.0	26.5	38.0

In 2016, the proportion of non-opiate successful completions in Walsall fell below the West Midlands and England benchmarks. The trend has since reversed and the gap between Walsall and comparators are reducing. The most recent data from 2019 shows that Walsall is now considered statistically similar to the West Midlands and England.

Successful completion of alcohol treatment



Time period	Value%	LowerCI95%	UpperCI95%
2010	47.5	42.9	52.1
2011	54.9	50.0	59.7
2012	56.0	50.9	60.9
2013	67.6	62.0	72.7
2014	48.9	43.2	54.7
2015	31.1	25.4	37.4
2016	31.0	26.4	36.1
2017	33.5	29.3	37.9
2018	42.7	37.9	47.6
2019	39.4	34.8	44.1

Historically, Walsall's successful completions for alcohol users have been very high and outperforming its benchmarks significantly. For 3 years since 2015, this indicator has fallen below its comparators, but a significant improvement was seen in 2018, with Walsall again being higher than West Midlands and England.

Several other indicators are also available via the Local Alcohol Profiles for England, which are accessible using PHE's Fingertips website. In summary, the latest data shows that Walsall hospital admissions for alcohol-related conditions (broad) are consistently statistically worse than England. In addition, alcohol-related & alcohol-specific mortality are locally significantly worse than England.

(1) Indicator data source: Public Health England. Public Health Profiles. [Date accessed: 9th Sep 2021] <https://fingertips.phe.org.uk> © Crown copyright [2021]

(2) PHE; Opiate and crack cocaine use: prevalence estimates by local area

Introduction

Making Connections Walsall (MCW) is a social prescribing Council led project which was originally set up by Public Health in 2017 to support socially isolated and lonely older people in Walsall. The service was enhanced in 2020 to support the vulnerable residents of Walsall through the pandemic.

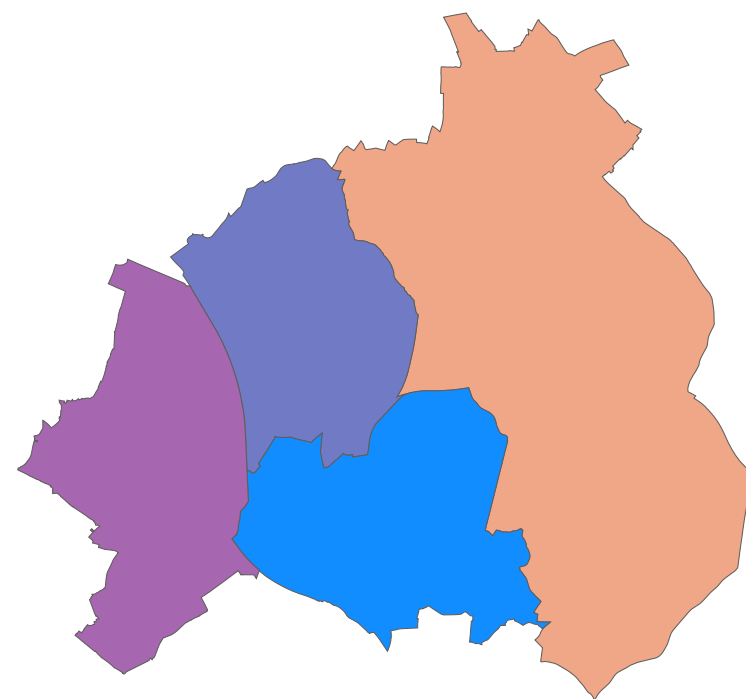
How it works

It adopts a social prescribing approach, with people referred into a central point (run by West Midlands Fire Service), that then links to four area-based hubs, run by GreenSquareAccord, Bloxwich Community Partnership, Manor Farm Community Association and Old Hall People's Partnership. Their social connectors (link workers) work with their residents and connect them with suitable local groups and activities, signposting to other support services as well as befriending services. These social connectors also monitor progress. It is a free service, fully funded by Walsall Metropolitan Borough Council.

Making Connections Walsall is a friendly service for residents of all ages in Walsall that aims to address loneliness, social isolation and to empower residents to take responsibility for their own health and well-being

Localities covered by the 4 community hubs

● Bloxwich Community Partnership ● GreenSquareAccord ● Manor Farm Community Association ● Old Hall People's Partnership



Activities and Services

Examples of services available include:

Reading groups, parent and toddler groups, youth provision, mobile library service, dementia cafes, keep fit, bereavement support groups, ballroom & sequence dancing, tea dancing, volunteering, bowling, arts and crafts, shopping services (for those who wish to do their own shopping), gardening, luncheon clubs, coffee mornings, men's sheds, knit and natter groups, adult education classes, befriending service (home visits and telephone).

How to get a referral

Any Walsall resident can access the service and a referral can be made via the following methods:

- Your GP
- Any other health care professional (e.g. practice nurse, pharmacist)
- Any other social care professional (e.g. carer)
- Other public sector workers (e.g. fire services)
- You can self-refer by telephoning 0121 380 6690
- [An MCW referral can also be made by completing the online referral form by using this link](#)

People accessing this service will be offered the opportunity to have a Safe and Well Visit if they have not previously had one.



Data Sources

Adult Obesity

Public Health England - Fingertips Public Health Profiles
<https://fingertips.phe.org.uk/search/adult%20obesity>

Physical; Activity

Public Health England - Fingertips Public Health Profiles
<https://fingertips.phe.org.uk/search/adult%20activity>

Tobacco Control & Smoking Cessation

Public Health England - Fingertips Public Health Profiles
<https://fingertips.phe.org.uk/search/smoking>

Drugs

Public Health England - Fingertips Public Health Profiles
<https://fingertips.phe.org.uk/search/drugs>

Alcohol

Public Health England - Fingertips Public Health Profiles
<https://fingertips.phe.org.uk/search/alcohol>

Making Connections Walsall

Making Connections Walsall - Walsall Council

Contact

If you have any queries please feel free to contact us via email:

Insight@walsall.gov.uk

Maps

Several maps appear throughout this document, to which the following applies:

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