

Cambridge City

This briefing provides an overview of demographic information and health priorities for Cambridge City. It complements the health profile for Cambridge City published in June 2011.¹

Demography

In 2010, there were 119,800 people living in Cambridge City, 14% under 15 years of age and 12% over 65 years. Cambridge City has the highest concentration of the working age population (16-64 years) at 73% of its total population compared to 65% on average in Cambridgeshire. There is a noticeably higher proportion of people aged 15-34 years due to the large student population.

Table 1: Total population : population estimates, mid 2010 (CCCR&PT)

Local Authority	Age group										Total
	0-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	
Cambridge City	6,600	10,600	27,500	23,600	13,900	12,400	11,000	7,500	4,800	2,100	119,800
Cambridge City (%)	5.5%	8.8%	22.9%	19.7%	11.6%	10.4%	9.1%	6.3%	4.0%	1.7%	
East Cambridgeshire	5,300	9,600	8,700	8,400	12,300	11,900	10,600	7,500	5,000	1,700	80,800
East Cambridgeshire (%)	6.5%	11.9%	10.7%	10.4%	15.2%	14.7%	13.1%	9.3%	6.2%	2.1%	
Fenland	5,200	11,200	10,800	10,300	12,400	13,000	12,700	9,700	6,800	2,200	94,200
Fenland (%)	5.6%	11.9%	11.5%	10.9%	13.2%	13.8%	13.4%	10.3%	7.2%	2.4%	
Huntingdonshire	9,500	20,000	19,300	18,500	25,600	25,100	21,400	15,200	8,000	2,800	165,300
Huntingdonshire (%)	5.8%	12.1%	11.7%	11.2%	15.5%	15.2%	13.0%	9.2%	4.8%	1.7%	
South Cambridgeshire	9,100	18,000	14,900	15,300	22,000	21,200	19,200	14,300	8,400	2,900	145,300
South Cambridgeshire (%)	6.2%	12.4%	10.2%	10.5%	15.1%	14.6%	13.2%	9.8%	5.8%	2.0%	
Cambridgeshire	35,700	69,300	81,100	76,100	86,300	83,700	74,700	54,200	33,000	11,700	605,400
Cambridgeshire (%)	5.9%	11.4%	13.4%	12.6%	14.3%	13.8%	12.3%	8.9%	5.5%	1.9%	

Source: Cambridgeshire County Council Research & Performance Team. Note: Totals may not sum due to rounding. Definition: Mid 2010 based single year population estimates (Note: Figures are rounded to the nearest 100).

The population of Cambridge City is forecast to increase by 26,300 (21.7%) by 2021 which is one-third of the total population increase in Cambridgeshire as a whole².

In terms of ethnicity, Cambridge City is the most diverse district in Cambridgeshire with 7.2% of people in the 'Other White' group compared with 4.2% in Cambridgeshire and 3.1% in the 'Chinese or Other Ethnic group' compared with 1.1% in Cambridgeshire.

Deprivation

In 2010, Cambridge City is Cambridgeshire's second most deprived district ranking 188/326 in England.³ The percentage rank of Cambridge City is lower in 2010, indicating that the district has become more deprived relative to the national picture. There are marked and known differences in deprivation with some areas, generally in the north and east of the district that are relatively deprived. Three wards, King's Hedges, Abbey and Arbury are in the fifth most deprived wards in Cambridgeshire. For the specific Health and Disability domain of IMD 2010, 14 Lower Super Output Areas (LSOAs) in Cambridgeshire are within the most deprived quintile nationally. Ten of these are in Cambridge City in King's Hedges, East Chesterton, Abbey, Romsey, Petersfield, Coleridge, and West Chesterton wards.

¹ www.healthprofiles.info Health Profile 2011. Source: Department of Health. © Crown Copyright 2011.

² Source: Cambridgeshire County Council Research & Performance Team mid 2010 forecasts.

³ This is based on scores from the Index of Multiple Deprivation (IMD) which assesses socioeconomic deprivation across seven domains: income; employment; health and disability; education; skills and training; housing and distance to services; living environment and crime.

Income deprivation affecting children index (IDACI)

In terms of Income Deprivation Affecting Children, Cambridge is the most deprived district in Cambridgeshire and is in the second most deprived quintile nationally. Of the 32,482 LSOAs nationally, 14 in Cambridgeshire are within the most deprived quintile and eight of these are in Cambridge, in Abbey, East Chesterton and King's Hedges wards. In these areas, more than 40% of children aged 0-15 years live in families in receipt of benefits.

Income deprivation affecting older people index (IDAOP)

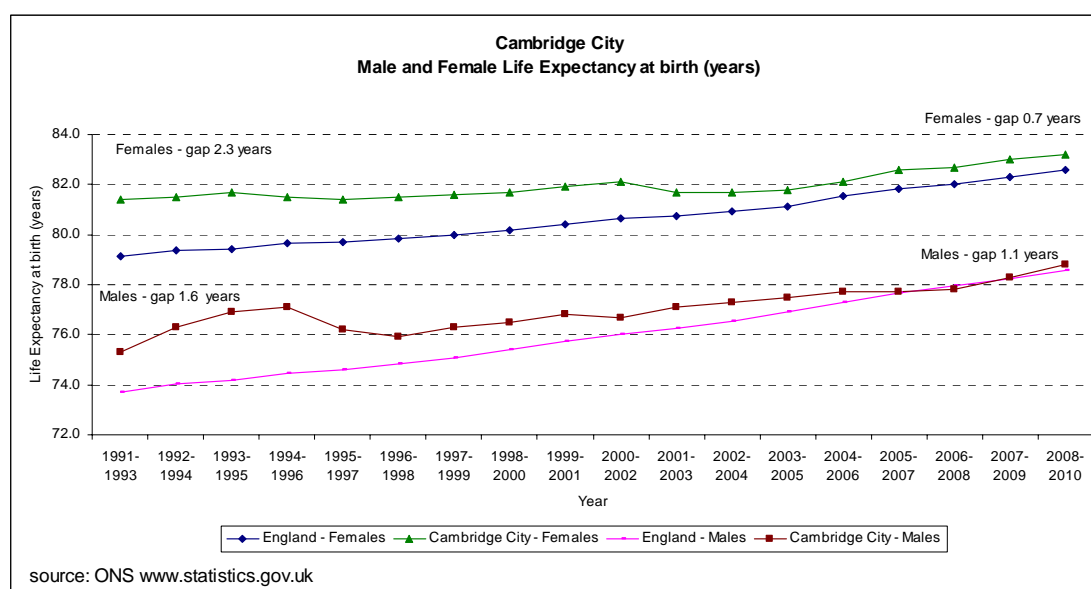
Of the 32,482 LSOAs nationally, seven in Cambridgeshire are within the most deprived quintile for income deprivation affecting older people and five of these are in Cambridge City in Abbey, Castle, Petersfield, King's Hedges and Romsey wards. In these areas 32-38% of people aged 65 and over experience income deprivation.

Life expectancy

Life expectancy for women in Cambridge City was 83.2 years in 2008-2010, above the England average but not statistically significantly so. For males the figure is 78.8 years, only just above the England average of 78.6 years (Figure 1). In both sexes, whilst life expectancy has improved, the rate of increase has not been as that seen in either England or in Cambridgeshire as a whole. Reasons for this are being explored by examining the mortality experience of both men and women in more detail but to date, reasons for this remain unclear.

However, life expectancy in the most deprived 40% of LSOAs in Cambridgeshire is statistically significantly lower than the Cambridgeshire average for both males and females. In Cambridge City, life expectancy is 6.7 years lower for men and 7.3 years lower for women in the 10% of most deprived areas of Cambridge City than in the least deprived areas (based on the Slope Index of Inequality published on 5th January 2011).

Figure 1: Male and female life expectancy at birth. Cambridge City



Mortality

In 2007-2009, deaths from circulatory disease and cancer make up 61.4% of all deaths in NHS Cambridgeshire and similarly in Cambridge City these are the main

causes of death. Over the last ten years, death rates from all causes of death for both males and females and for premature deaths (those in the under 75s) from heart disease, stroke and cancer have decreased In Cambridge City and are lower than the national rates. However, the improving local trends have tended to level off in recent years and become closer to the national average. The gap in mortality between Cambridge City and Cambridgeshire's average has been increasing and has been above the county average for the last four time periods.

Figure 2: All cause mortality in people aged under 75 years. Cambridge City, Cambridgeshire and England

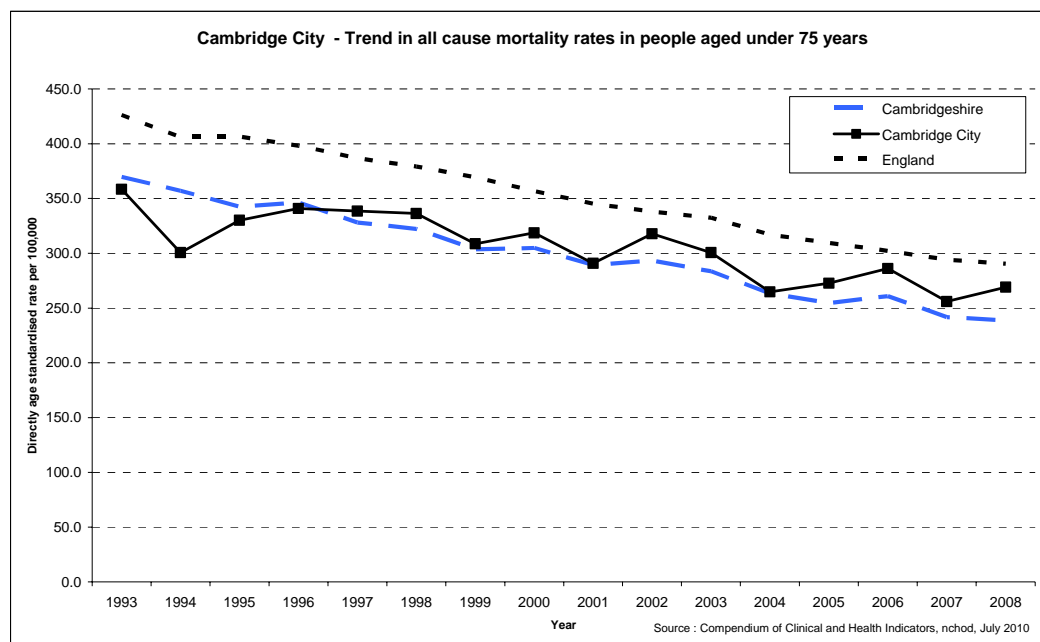


Table 2 summarises the main mortality rates 2007-2009 together with an assessment of whether the change in trend is faster or slower than the national change in trend.

Table 2: Mortality – trends and 2007/09 rates

Disease area	Cambridge City		Cambridgeshire		England	
	2007/09 rate	Trend	2007/09 rate	Trend	2007/09 rate	Trend
All Cause Mortality, all ages	549.5	↓	505.1	↓	567.1	↓
All Cause Mortality, under 75 years	274.1	↓	238.7	↓	287.8	↓
All Circulatory diseases, under 75 years	61.4	↓	56.6	↓	70.5	↓
All Cancers, under 75 years	102.7	↓	97.2	↓	112.1	↓
Suicide and Undetermined Injury, all ages	11.1	↑	8.3	↓	7.9	↓
Accidents, all ages	17.0	↓	16.3	↓	15.7	↓
Land based transport accidents, all ages	3.1	↑	5.9	↓	4.3	↓

Source: Compendium of Clinical and Health Indicators, NCHOD, March 2011 *Note: the trend is based on the annual change in rates between 1998 and 2009 (except for Land based transport accidents which are based on 1996 to 2008)*

Key
2007/09 rate

Statistically significantly higher than England	Red
Higher than England	Orange
Lower than England	Yellow
Statistically significantly lower than England	Green

Trend (Exponential Trendline)

Increasing trend	↑
Decreasing trend	↓
Faster rate of change than England	Green
Slower rate of change than England	Yellow
Opposite trend to England	Red

For Cambridge City, mortality from Suicide and Undetermined Injury and Accidents (All Ages) are above the Cambridgeshire average but both are based on relatively small numbers and prone to fluctuation.

Recorded prevalence of disease in General Practice 2010/11 Quality and Outcomes Framework (QoF) Cambridge City GP Practices

The spine chart below shows data on the recorded prevalence of various conditions for all Cambridge City GP Practices combined for 2010/11. The number of people on disease registers such as coronary heart disease (CHD), chronic kidney disease (CKD), chronic obstructive pulmonary disease (COPD) and other conditions are shown together with the proportion of the total list size at January 2011. This gives an indication of the 'recorded prevalence' of various conditions in the local area.

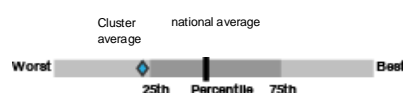
The central column displays the local % value visually in the context of the England range of values from England 'worst' to England 'best' and the key describes the colours used to demonstrate whether or not the figure is statistically significantly different to the national value. The Cambridgeshire average figure is also shown (blue diamond on the chart) and the final column displays whether or not the local value is significantly different to the Cambridgeshire average.

For Cambridge City the majority of the QoF values displayed, with the exception of the Mental Health indicator, are significantly better than that of England and of Cambridgeshire as a whole. Some caution is necessary since the figures can be an indication of under-recording rather than lower disease prevalence. Also, because the QoF percentages are not adjusted for age, the low prevalences in Cambridge are likely to be related to the younger age profile of the population.

Figure 3: Spine chart Cambridge City Quality and Outcomes (QoF) data 2010/11 compared to England and Cambridgeshire

Key Spine chart England comparison

- Significantly better than England average
- Not significantly different from England average
- Significantly worse than England average
- No significance can be calculated



Cambridgeshire comparison

- Significantly better than Cambridgeshire average
- Not significantly different
- Significantly worse than Cambridgeshire average

	Indicator	Number of people on local registers	% of total list size	Eng avg	Eng worst	England range	Eng best	Camb avg	Sig diff from Camb avg
1	Asthma GP recorded prevalence (%)	8,504	5.5	5.9	7.5		3.3	6.5	■
2	Atrial Fibrillation GP recorded prevalence (%)	1,826	1.2	1.4	2.9		0.4	1.5	■
3	Cancer GP recorded prevalence (%)	2,165	1.4	1.6	3.5		0.6	1.8	■
4	CHD GP recorded prevalence (%)	3,245	2.1	3.4	6.1		1.4	3.0	■
5	CKD GP recorded prevalence 18+ (%)	3,136	2.5	4.3	10.3		1.3	3.8	■
6	COPD GP recorded prevalence (%)	1,623	1.0	1.6	3.7		0.5	1.5	■
7	Dementia GP recorded prevalence (%)	660	0.4	0.5	1.0		0.2	0.5	■
8	Depression GP recorded prevalence(%)	12,772	8.2	8.8	16.2		2.9	10.1	■
9	Diabetes GP recorded prevalence 17+ (%)	4,207	3.3	5.5	8.1		2.4	5.0	■
10	Epilepsy GP recorded prevalence 18+ (%)	713	0.6	0.8	1.3		0.4	0.7	■
11	Heart failure due to LVD GP recorded prevalence (%)	440	0.3	0.4	0.9		0.2	0.4	■
12	Heart failure GP recorded prevalence (%)	777	0.5	0.7	1.3		0.3	0.7	■
13	Hypothyroidism GP recorded prevalence (%)	3,593	2.3	3.0	5.2		1.2	3.2	■
14	Hypertension GP recorded prevalence (%)	14,026	9.0	13.5	19.8		7.9	12.9	■
15	Learning Disabilities GP recorded prevalence 18+ (%)	390	0.3	0.4	0.9		0.1	0.4	■
16	Mental health GP recorded prevalence (%)	1,703	1.1	0.8	1.5		0.3	0.7	■
17	Palliative Care GP recorded prevalence (%)	177	0.1	0.2	0.8		0.1	0.2	○
18	Stroke and TIA GP recorded prevalence (%)	1,792	1.2	1.7	3.2		0.7	1.5	■

Source: QoF 2010/11. Information Centre. Spine chart from West Midlands Public Health Observatory

Lifestyles

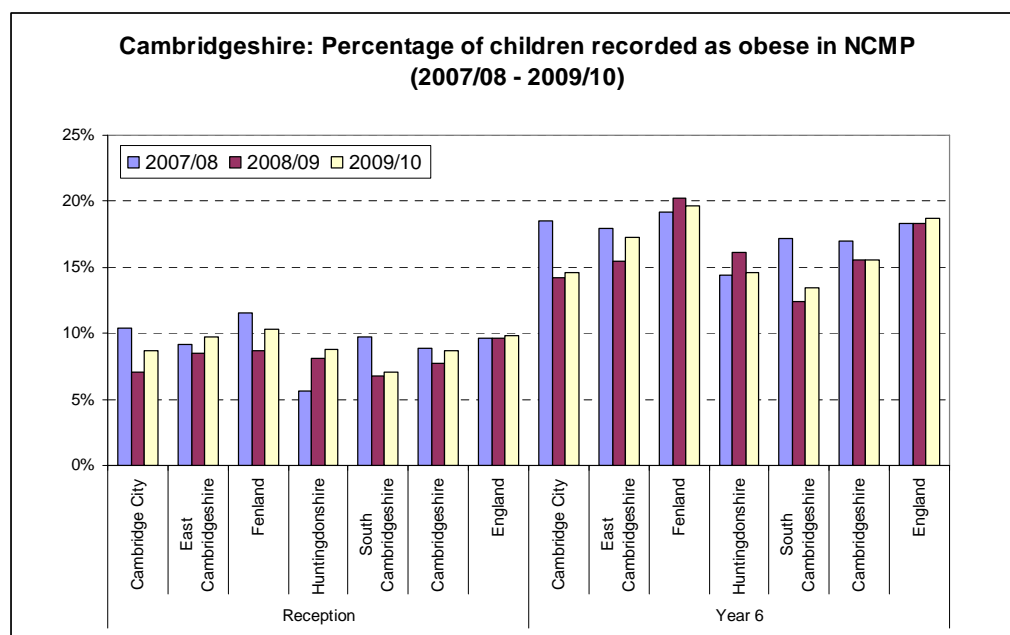
Smoking

Smoking prevalence is estimated to be slightly lower in Cambridge City (17.1%) in the adult population than in Cambridgeshire (19.9%) but this still represents over 17,000 smokers in the district. Increasing numbers of people access NHS Stop Smoking Services each year and in 2010/11 there were 1,494 people in Cambridge City who set a quit date through Camquit (the local Stop Smoking Service) of whom 705 were successful in quitting at four weeks.

Childhood obesity

Children's weight in Cambridgeshire is recorded in the National Childhood Measurement Programme (NCMP). Levels of obesity in children in Cambridgeshire are generally lower than seen nationally. An increase in the proportion of obese children between Reception and Year 6 is seen each year the NCMP has run. In Cambridge City 8.7% of children in Reception and 14.6% in Year 6 were recorded as obese in NCMP. For Year 6 children, there was little change in the rate of childhood obesity recorded in the last two years.

Figure 4: Trends in childhood obesity



Estimates of adult obesity suggest that 17.2% of adults in Cambridge City are obese.

Physical activity

Sport England surveys suggest that in Cambridgeshire (2009/10), 23.2% of people participated in at least 30 minutes of moderate intensity participation in sport and active recreation on at least three days a week. In general there have been downward trends in participation rates at district level. (see additional comments under national health profiles)

National health profiles

The national health profiles, assembled by the English Public Health Observatories (PHOs), were released in June 2011. The profiles include benchmarking of local information against the national position. The full profiles can be found at <http://www.healthprofiles.info>. The Spine Chart is attached at Appendix 1.

Indicators where Cambridge is significantly worse than the national average:

- Statutory homelessness
- Violent crime
- Physically active children
- Hospital stays for alcohol related harm

Statutory homelessness. The local value has improved slightly from the 2010 profile, but the national position has improved at a greater rate and this accounts for the adverse local statistical assessment in 2011.

Violent crime. Cambridge City's rate of violent crime is statistically significantly higher than in England. However, the trend shows that recorded offences are decreasing, with the rate of offences per 1,000 population at their lowest level in 2009/10 since 2002/03. Crime, particularly violent crime, is linked to mental health. They may have similar determinants such as drugs, alcohol and deprivation and victims of crime are more likely to suffer mental health problems such as depression. Those who suffer from mental illness are more likely to be victims of crime than commit crime, although violent crimes committed by people with mental illnesses are more frequently reported.

Physically active children. The rate has declined locally and improved nationally. However, there are a range of indicators for physically active children and Cambridgeshire performed well in 2009/10 for children spending more than two hours per week on school sport with improving levels of participation. Rates of Year 6 childhood obesity are around the same as last year and are significantly better than nationally. 14.6% of Year 6 children are classified as obese and fewer than average pupils spend at least three hours each week on school sport.

Alcohol Recent rates of hospital stays due to alcohol related harm are above average and this remains the case in comparison with the 2010 profile. For the population served by NHS Cambridgeshire, 8.3% of alcohol related hospital admissions are caused by alcohol specific mental and behavioural disorders in men (529 actual admissions) and 2.5% in women (159 admissions). Most of these alcohol specific mental and behavioural admissions occur in the 30-39 year old age group (over 40%). A local alcohol profile for Cambridge is included at Appendix 2 – the full profile can be found at <http://www.nwph.net/alcohol/lape>. This shows that Cambridge is also significantly 'worse' than England for crimes related to alcohol and binge drinking.

Please also see the local Drug and Alcohol Needs Assessments at <http://www.cambridgeshirejsna.org.uk/other-assessments/daat-needs-assessments>.

Cambridge is ranked among the 20% of local authorities with the worst results on the following indicators:

- Alcohol-specific hospital admission for males and females.
- Increasing risk drinking at 22.5% (synthetic estimate).
- Binge drinking at 28% (synthetic estimate).

There were relatively high numbers of acute admissions from people in their teens and early twenties in Cambridge City compared to the other districts. However, the age profile is different with relatively more young people living in the City compared to other districts

Drug related deaths

Drug related deaths are described in the local Drugs and Alcohol Needs Assessments (referenced on previous page). For the years 2006-2008, there were 42 drug related deaths in Cambridgeshire with the highest number, and rate being in Cambridge City. The rate was 5.9 per 100,000 population compared with rates of 1.7 in Fenland and Huntingdonshire.

Mental health

Findings from the JSNA 'Mental Health in adults of working age' indicate that the prevalence of mental health issues in Cambridge City is high. The reasons for this are complex. Please see the JSNA 'Mental health in adults of working age' at <http://www.cambridgeshirejsna.org.uk/mental-health-adults-working-age/mh-adults>. Note also that the Cambridge Access Surgery serves homeless people. According to QOF data 2010/11, the recorded prevalence of mental illness at the surgery was 15.0% compared to the NHS Cambridgeshire average of 0.7%.

Priorities for Cambridge City

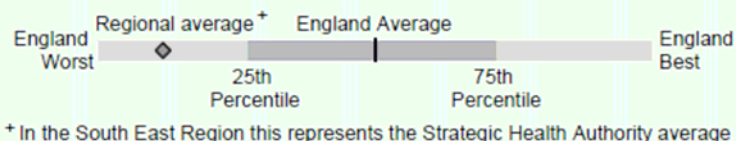
The following priorities were identified in the health profile for Cambridge.

- Addressing local inequalities in health. See the local health inequalities strategy at: <http://www.cambridgeshirepct.nhs.uk/downloads/Your%20Health/OtherPublicHealthReports/Cambridgeshire%20Health%20Inequalities%20Strategy%202009-2011.pdf>.
- Working in partnership to address the needs of homeless people. Please see the 'People who are homeless or at risk of homelessness' JSNA at: <http://www.cambridgeshirejsna.org.uk/jsna-topics-published-previously/people-who-are-homeless-or-risk-homelessness>.
- A focus on prevention, including alcohol related harm, smoking physical activity and obesity. Please see the prevention JSNA for working age adults at: <http://www.cambridgeshirejsna.org.uk/cambridgeshire-joint-strategic-needs-assessment-jsna/jsna-phase-5-prevention>

Health summary for Cambridge

The chart below shows how the health of people in this area compares with the rest of England. This area's result for each indicator is shown as a circle. The average rate for England is shown by the black line, which is always at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that this area is significantly worse than England for that indicator; however, a green circle may still indicate an important public health problem.

- Significantly worse than England average
- Not significantly different from England average
- Significantly better than England average



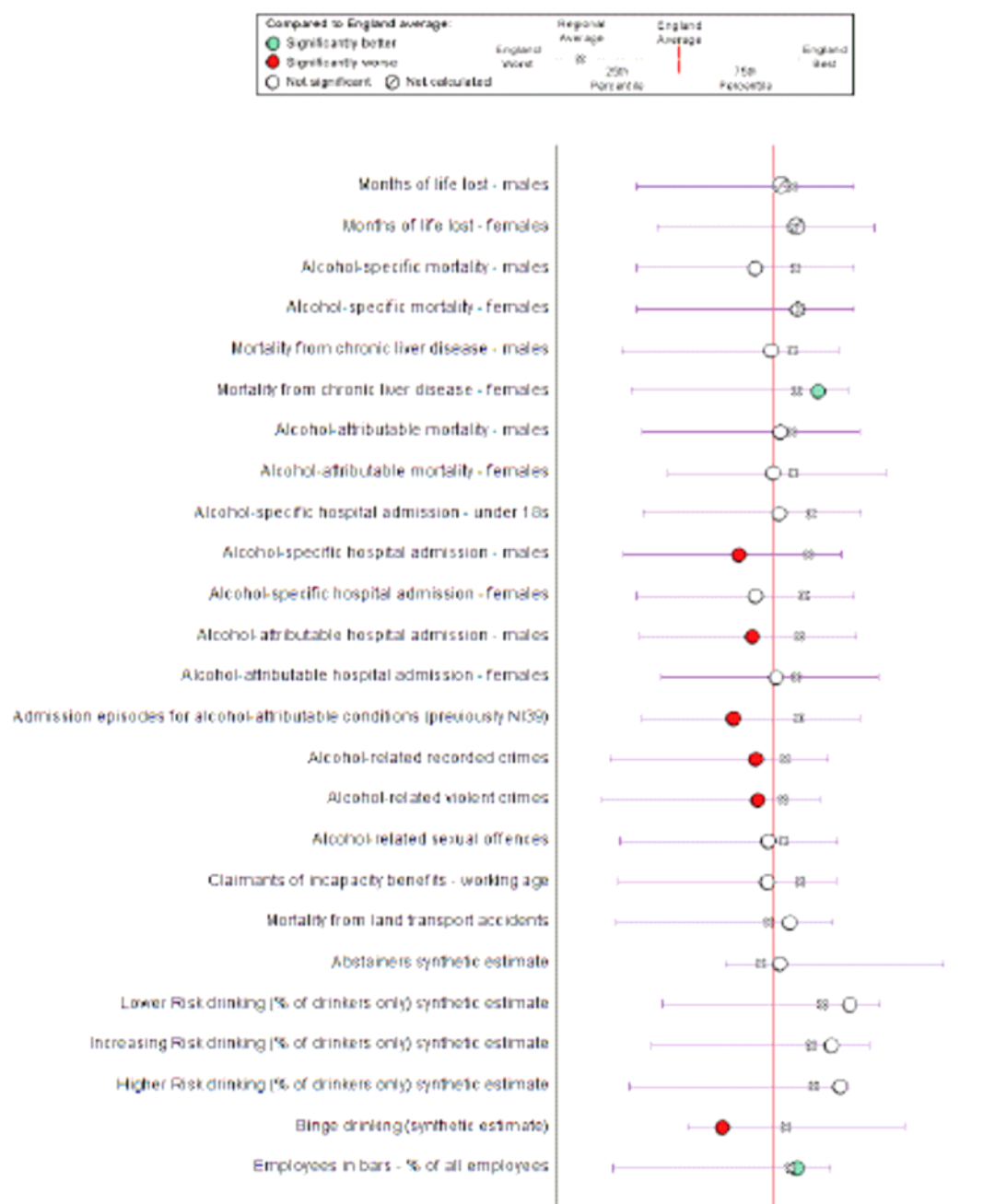
Domain	Indicator	Local No. Per Year	Local Value	Eng Avg	Eng Worst	England Range	Eng Best
Our communities	1 Deprivation	0	0.0	19.9	89.2		0.0
	2 Proportion of children in poverty	2985	16.8	20.9	57.0		5.7
	3 Statutory homelessness	126	2.74	1.86	8.28		0.08
	4 GCSE achieved (5A*-C inc. Eng & Maths)	464	57.6	55.3	38.0		78.6
	5 Violent crime	2118	17.8	15.8	35.9		4.6
	6 Long term unemployment	367	4.0	6.2	19.6		1.0
Children's and young people's health	7 Smoking in pregnancy	155	11.4	14.0	31.4		4.5
	8 Breast feeding initiation	1085	79.7	73.6	39.9		95.2
	9 Physically active children	5291	47.7	55.1	26.7		80.3
	10 Obese children (Year 6)	113	14.6	18.7	28.6		10.7
	11 Children's tooth decay (at age 12)	n/a	0.5	0.7	1.6		0.2
	12 Teenage pregnancy (under 18)	59	32.1	40.2	69.4		14.6
Adults' health and lifestyle	13 Adults smoking	n/a	15.4	21.2	34.7		11.1
	14 Increasing and higher risk drinking	n/a	14.7	23.6	39.4		11.5
	15 Healthy eating adults	n/a	37.1	28.7	19.3		47.8
	16 Physically active adults	n/a	12.2	11.5	5.8		19.5
	17 Obese adults	n/a	14.4	24.2	30.7		13.9
Disease and poor health	18 Incidence of malignant melanoma	13	14.1	13.1	27.2		3.1
	19 Hospital stays for self-harm	292	222.1	198.3	497.5		48.0
	20 Hospital stays for alcohol related harm	2353	2157	1743	3114		849
	21 Drug misuse	789	8.8	9.4	23.8		1.8
	22 People diagnosed with diabetes	4078	3.28	5.40	7.87		3.28
	23 New cases of tuberculosis	14	12	15	120		0
	24 Hip fracture in 65s and over	102	495.2	457.6	631.3		310.9
Life expectancy and causes of death	25 Excess winter deaths	35	13.1	18.1	32.1		5.4
	26 Life expectancy - male	n/a	78.3	78.3	73.7		84.4
	27 Life expectancy - female	n/a	83.0	82.3	79.1		89.0
	28 Infant deaths	7	5.21	4.71	10.83		0.68
	29 Smoking related deaths	118	173.2	216.0	361.5		131.9
	30 Early deaths: heart disease & stroke	54	61.4	70.5	122.1		37.9
	31 Early deaths: cancer	89	102.7	112.1	159.1		76.1
	32 Road injuries and deaths	45	38.2	48.1	155.2		13.7

Indicator Notes

1 % of people in this area living in 20% most deprived areas in England 2007 2 % children in families receiving means-tested benefits & low income 2008 3 Crude rate per 1,000 households 2009/10 4 % at Key Stage 4 2009/10 5 Recorded violence against the person crimes crude rate per 1,000 population 2009/10 6 Crude rate per 1,000 population aged 16-64, 2010 7 % of mothers smoking in pregnancy where status is known 2009/10 8 % of mothers initiating breastfeeding where status is known 2009/10 9 % of year 1-13 pupils who spend at least 3 hours per week on high quality PE and school sport 2009/10 10 % of school children in Year 6, 2009/10 11 Weighted mean number of decayed, missing or filled teeth in 12-year-olds, 2008/09 12 Under-18 conception rate per 1,000 females aged 15-17 (crude rate) 2007-2009 (provisional) 13 % adults aged 18+, 2009/10 14 % aged 16+ in the resident population, 2008 15 % adults, modelled estimate using Health Survey for England 2006-2008 (revised) 16 % aged 16+ 2009/10 17 % adults, modelled estimate using Health Survey for England 2006-2008 (revised) 18 Directly age standardised rate per 100,000 population under 75, 2005-2007 19 Directly age and sex standardised rate per 100,000 population 2009/10 20 Directly age and sex standardised rate per 100,000 population, 2009/10 21 Estimated problem drug users using crack and/or opiates aged 15-64 per 1,000 resident population, 2008/09 22 % of people on GP registers with a recorded diagnosis of diabetes 2009/10 23 Crude rate per 100,000 population 2007-2009 24 Directly age and sex standardised rate for emergency admission 65+, 2009/10 25 Ratio of excess winter deaths (observed winter deaths minus expected deaths based on non-winter deaths) to average non-winter deaths 1.08.06-31.07.09 26 At birth, 2007-2009 27 At birth, 2007-2009 28 Rate per 1,000 live births 2007-2009 29 Per 100,000 population aged 35+, directly age standardised rate 2007-2009 30 Directly age standardised rate per 100,000 population under 75, 2007-2009 31 Directly age standardised rate per 100,000 population under 75, 2007-2009 32 Rate per 100,000 population 2007-2009

For links to health intelligence support in your area see www.healthprofiles.info More indicator information is available online in The Indicator Guide.

You may use this profile for non-commercial purposes as long as you acknowledge where the information came from by printing 'Source: Department of Health. © Crown Copyright 2011'.



North West Public Health Observatory
 Centre for Public Health
 Liverpool John Moores University
 Henry Cotton Campus
 15-21 Webster St
 Liverpool L3 2ET

Tel: +44(0)151 231 4535
 Fax: +44(0)151 231 4552
 Email: nwpho-contact@jmu.ac.uk
 Website: <http://www.nwpho.org.uk>
<http://www.cph.org.uk>

Site design, development and data produced by North West Public Health Observatory on behalf of the Public Health Observatories in England