

Chapter 9

Health and Lifestyles

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9 Health and lifestyles

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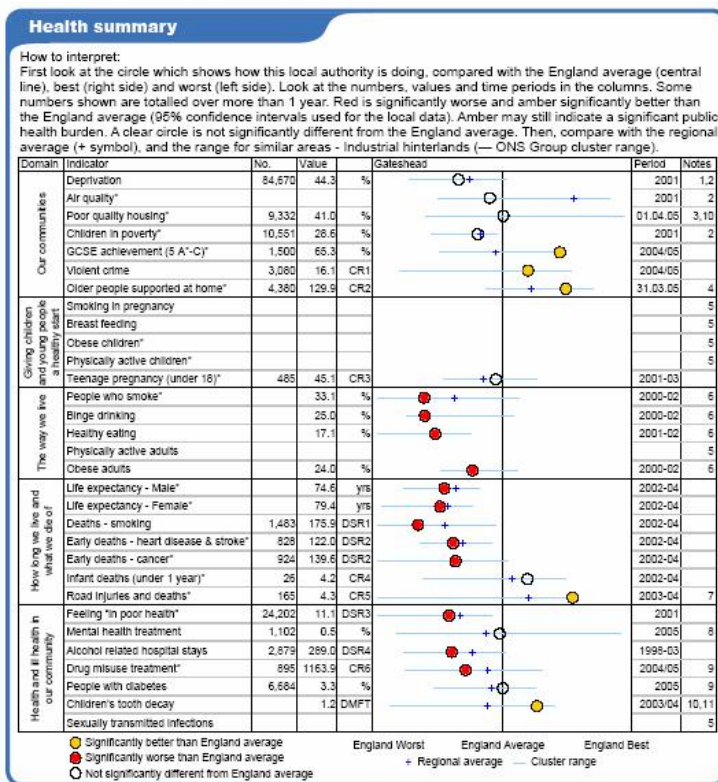
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9 Health and lifestyles

Introduction

Health and lifestyles are inextricably linked. For example eight out of ten deaths due to lung cancer are caused by smoking¹, so in an area where a greater proportion of the population smokes, one would expect to see poorer health status.

An extract from the recently published Community Health Profile for Gateshead² (see below) compares figures for Gateshead and England across a wide range of health-related indicators. While Gateshead is better than average for educational achievement, infant health and road injuries and deaths, it is consistently poorer than average for indicators of health-related behaviours such as smoking, heavy drinking, healthy eating and obesity.



In the following pages, the available data for Gateshead around key lifestyle indicators such as smoking, alcohol consumption, physical exercise and diet are summarised.

New data from Primary Care

Up until now data on smoking status and obesity has been derived from questionnaires and studies based on a sample of the population. National surveys such as the Health Survey for England do not provide large enough samples for the results to be analysed at

local authority level. Due to their cost, local surveys such as the 2004 Gateshead Lifestyle Survey are only undertaken irregularly. The Department of Health, however, is now encouraging GPs to record information on smoking status and body mass index (which measures overweight or obesity) resulting from patient consultations and health checks. This information is recorded in a systematic way so that population prevalence can be calculated quickly and easily at both practice and PCT level. At April 2006, 53% of the Gateshead population had a valid record of smoking status and 33% had a recent record of their Body Mass Index. At the moment, these figures reflect health status among those people whose health is poorer than average, as this group is more likely to regularly consult their GP.

¹ Twigg L. et al, "The Smoking Epidemic in England", 2001, Health Development Agency

² Gateshead Community Health Profile, 2006, Association of Public Health Observatories, available at www.communityhealthprofiles.info

Over time it is hoped that the proportion of the population with a valid measurement will increase so that prevalence figures will be representative of the population as a whole. This reliable and accessible source of data can then be used to calculate variations in prevalence between small geographical areas, which can, in turn, be used to target health services and health improvement interventions.

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Acknowledgements

This chapter of the Gateshead Compendium of Health Related Statistics contains data from a range of partner agencies. Sources of data are detailed at the foot of each individual item. Thanks are extended to the following organisations for providing and allowing use of their information:

Association of Public Health Observatories

North East Public Health Observatory



9.1 How many people smoke in Gateshead? – a comparison of estimates

Best estimates suggest that between 24% and 27% of people in Gateshead smoke. This puts the number of adult smokers (ages 16 and over) between 38,000 and 42,000. This compares with an estimated prevalence of 28% for the NE and 23% for England.

Estimates of smoking prevalence for Gateshead.

Source	Period	Age range (years)	Estimates of prevalence		
			Persons	Males	Females
Acxiom Shoppers Survey*	2004	adults	27%	-	-
Gateshead Lifestyle Survey**	2004	18+	24%	23%	25%
Gateshead Lifestyle Survey**	1996	18+	30%	32%	29%
Synthetic estimates***	2000-02	16+	33%	-	-
Estimates from GP Practice data****	2006	15-75	27%	-	-

* "Smoking Prevalence in the North East", North East Public Health Observatory, 2006

** Gateshead PCT

*** Office for National Statistics available on the Neighbourhood Statistics website

Estimates of smoking prevalence for England and the NE

Area	Period	Age range (years)	Estimates of prevalence		
			Persons	Males	Females
England (Health Survey for England)	2004	16+	23%	24%	23%
England (General Household Survey)	2004	16+	25%	26%	23%
North East (Health Survey for England)	2003	16+	28%	26%	29%
North East (General Household Survey)	2004	16+	28%		

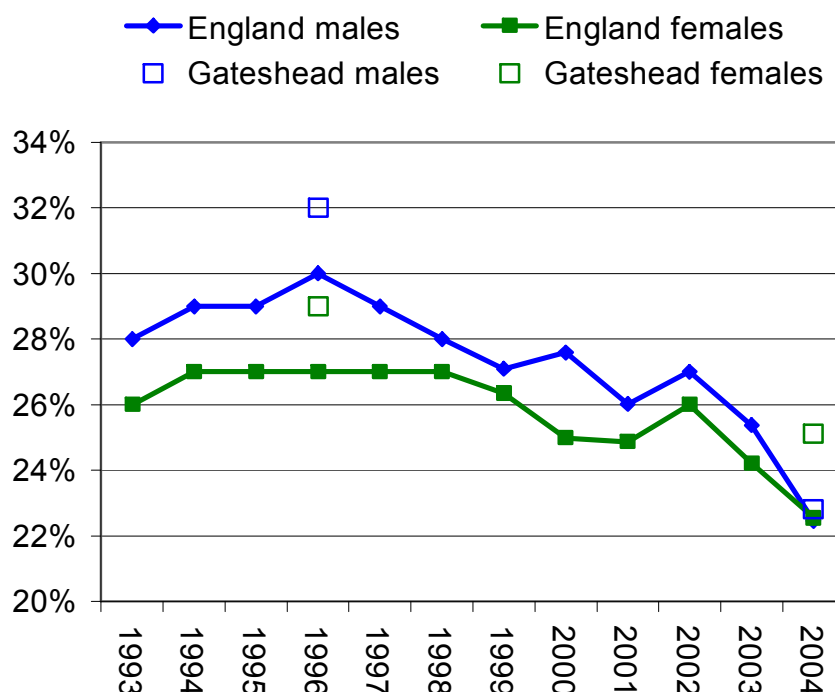
Sources of data

- Gateshead Lifestyle Survey – carried out in 1996 and 2004, implemented using a telephone survey, it provides an estimate of smoking prevalence for Gateshead as a whole. Sample size was insufficient to provide robust estimates of prevalence at ward level.
- Health Survey for England – carried out every year, implemented via face-to-face interview, results only analysed down to Strategic Health Authority area.
- General Household Survey – carried out every year, results not regularly published below Government Office Area level.
- Synthetic estimates of smoking prevalence for local authority areas and electoral wards (2000-02) – a one-off report based on Health Survey for England data – a mathematical relationship was derived between likelihood of lifestyle behaviours and population characteristics (e.g. age, marital status, socio-economic group, Govt. Office Region of residence) which was then applied to small area populations for which those characteristics were known
- Acxiom Shoppers Survey – Acxiom is a commercial company that provides an estimate of smoking prevalence for each local authority area from a survey which is carried out every year. As the data is sold by a commercial organisation, no information is available as to how the estimates are calculated.

9.1 How many people smoke in Gateshead (cont.)

Local surveys have been irregular, but evidence suggests that the prevalence of smoking in Gateshead has fallen between 1996 and 2004. Results from the Health Survey for England carried out annually shows that this fall in prevalence reflects the national trend. However, prevalence among females in Gateshead has fallen at a slower rate than it has nationally, and now the prevalence of smoking among females in Gateshead is higher than that for males.

Estimates of smoking prevalence for England and Gateshead



	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
England males*	28.0%	29.0%	29.0%	30.0%	29.0%	28.0%	27.1%	27.6%	26.0%	27.0%	25.4%	22.5%
England females*	26.0%	27.0%	27.0%	27.0%	27.0%	27.0%	26.3%	25.0%	24.9%	26.0%	24.2%	22.5%
Gateshead males**				32.0%								22.8%
Gateshead females**				29.0%								25.1%

* Health Survey for England, Department of Health, ** Gateshead Lifestyle Survey, Gateshead PCT

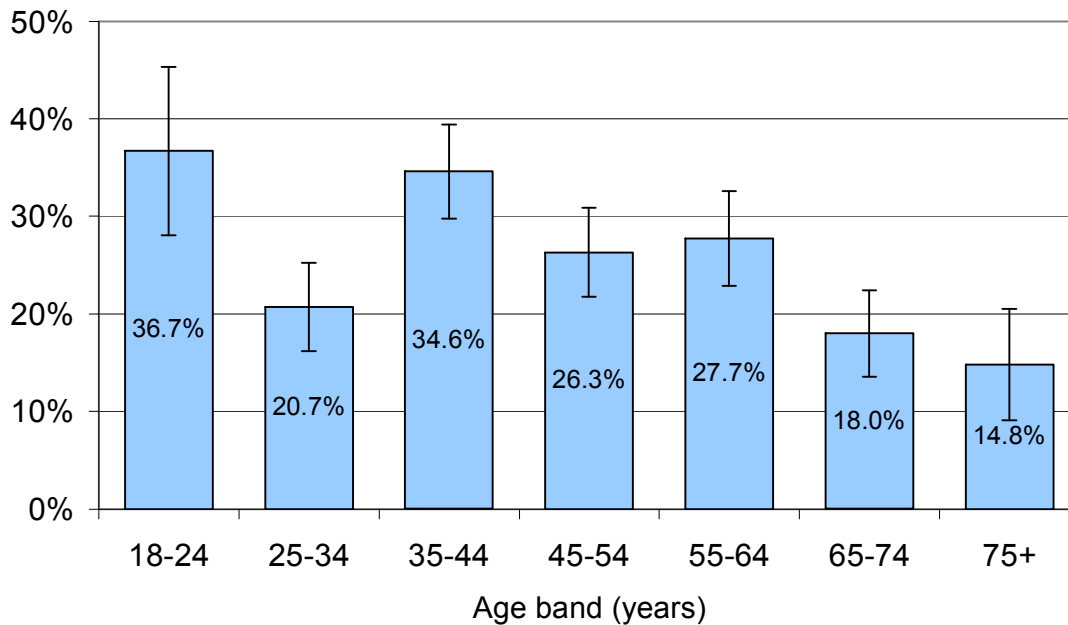
Smoking is the single most preventable cause of ill health, so what is being done to help people give up in Gateshead?

NHS Stop Smoking Services in Gateshead in 2005/06 helped 1,500 people to give up smoking at the four-week follow-up and evidence suggests that half of these people will continue not to smoke after 12 months. Using high-end estimates of smoking prevalence, this represents 4% of smokers who quit at four weeks and 2% who are still not smoking after 12 months. In addition, the Gateshead Health Promotion Resource Service (tel: 0191 433 5684) is able to provide free supplies of the most up to date, evidence-based leaflets explaining the health benefits of giving up and where people can go for help with quitting.

9.2 Prevalence of smoking by age

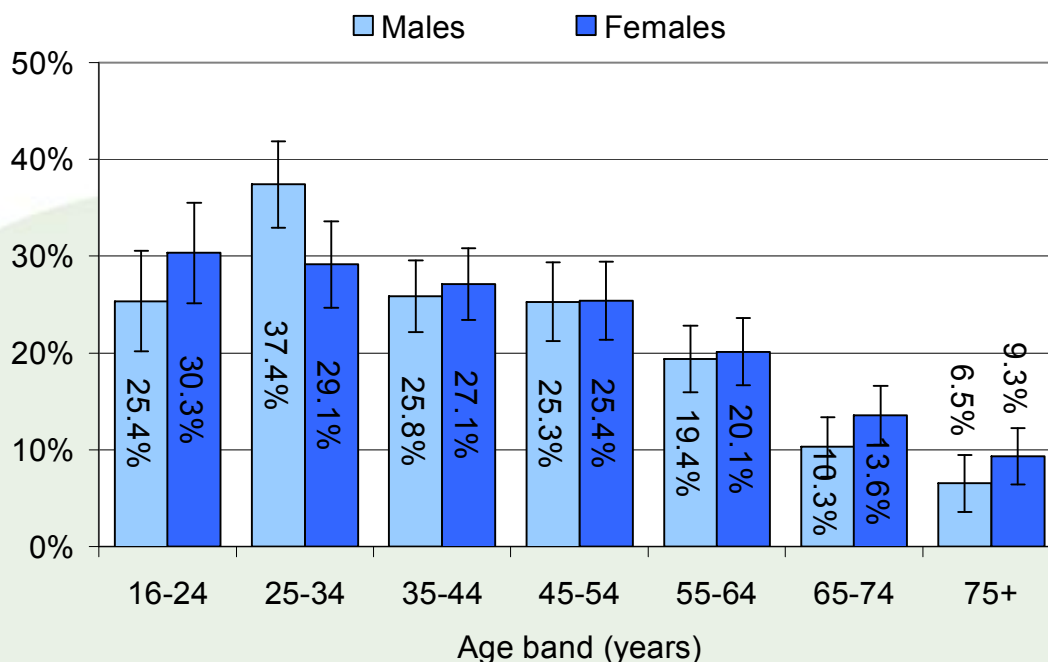
Estimated patterns of smoking prevalence among young people vary between national and local surveys. Nationally, highest prevalence is among 25 to 34 year olds, whereas in Gateshead, young people between 18 and 24 years are most likely to smoke.

2004 Gateshead Lifestyle Survey - Smoking Prevalence by Age Band for All People



Source: Gateshead PCT

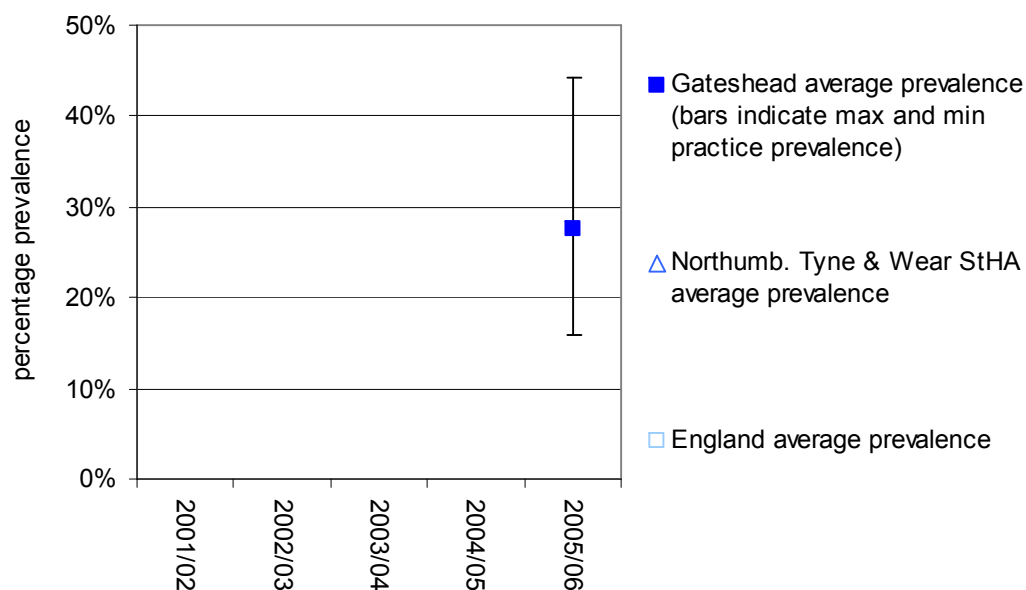
Health Survey for England 2004 - Smoking Prevalence by Age Band for Males and Females



Source: Health Survey for England 2004, Department of Health

9.3 Prevalence of smoking – estimates from GP records

Average percentage prevalence of smoking among people ages 16-75 years from Gateshead GP practice records. Data has only been collected since the start of 2005/06 and is updated quarterly.



Year end	Gateshead					NTW StHA	England
	percentage of population measured	average prevalence	minimum practice prevalence	maximum practice prevalence	practice prevalence interquartile range	average prevalence	average prevalence
2001/02	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2002/03	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2003/04	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2004/05	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2005/06	53.1%	27.5%	15.9%	44.3%	12.5%	n/a	n/a

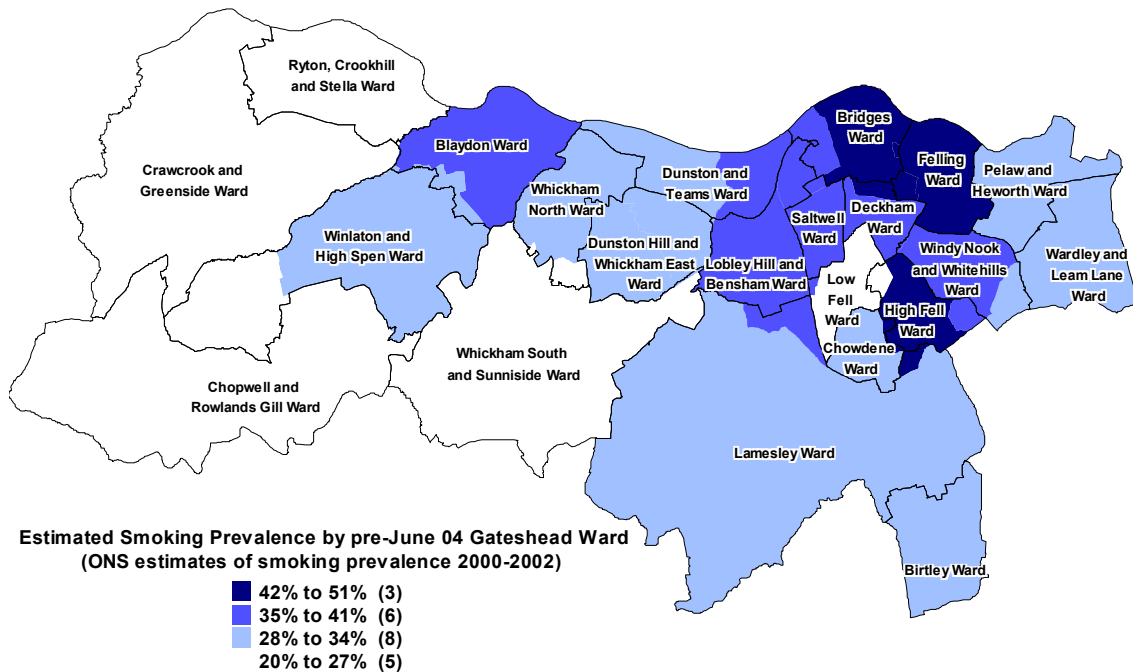
Source: Gateshead PCT, data is from a census carried out at the year end

n/a = not available, NTW StHA = Northumberland, Tyne & Wear Strategic Health Authority

Criteria for inclusion: people ages 15-75 years who have been asked on a single occasion and who don't smoke or who smoke and have been asked in the past 15 months.

9.4 Prevalence of smoking – synthetic³ estimates for Gateshead electoral wards

These estimates are for pre-June 2004 Gateshead electoral wards and are laid over a map of the new electoral ward boundaries.



Estimates of prevalence are average figures for the years 2000-2002. National estimates of smoking prevalence have fallen since 2002. When comparing these ward level estimates with figures on smoking prevalence from other sources the differences in time period and methodology should be taken into account. In 2006, these estimates appear high. However they are a useful pointer towards relative local variations in smoking prevalence.

The ward level data for Gateshead and all other Local Authority areas in England is available on the Office for National Statistics' [Neighbourhood Statistics](#) website.

³ These synthetic estimates are derived from a mathematical model. The model uses Health Survey for England data for four years and links the likelihood of a person smoking with characteristics such as age, marital status, socio-economic group and geographical region of residence. It then estimates the number of smokers in each ward, given the composition of the population in that ward, from which prevalence is derived. Using this model it is possible to generate estimates of prevalence for smaller geographical areas than would otherwise be possible.

9.4 Prevalence of smoking – synthetic estimates for electoral wards (cont.)

Gateshead pre-June 2004 Ward	2000-02	H/L*
Bede	50.2%	H
Felling	48.5%	H
High Fell	44.2%	H
Deckham	41.2%	H
Teams	41.1%	H
Saltwell	39.9%	
Bensham	38.6%	
Leam	37.7%	
Blaydon	36.8%	
Dunston	33.5%	
Pelaw and Heworth	33.2%	
Lamesley	33.1%	
Wrekendyke	31.9%	
Chowdene	29.5%	
Winlaton	29.3%	
Birtley	28.1%	
Whickham North	28.1%	
Chopwell and Rowlands Gill	27.1%	
Crawcrook and Greenside	25.2%	
Ryton	22.4%	
Whickham South	22.4%	
Low Fell	20.6%	
Gateshead PCT	33.1%	H
Newcastle PCT	32.2%	H
North Tyneside PCT	28.7%	
Northumberland Care Trust	26.0%	
South Tyneside PCT	32.9%	H
Sunderland Teaching PCT	32.8%	H
ENGLAND	25.8%	

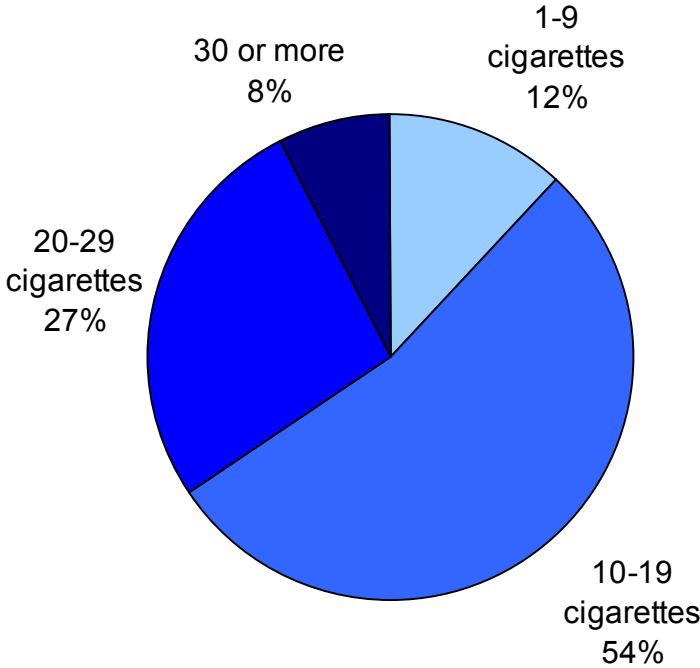
*H/L = significantly higher (H) or lower (L) than England at 95% confidence

Source: Office for National Statistics at www.neighbourhood.statistics.gov.uk

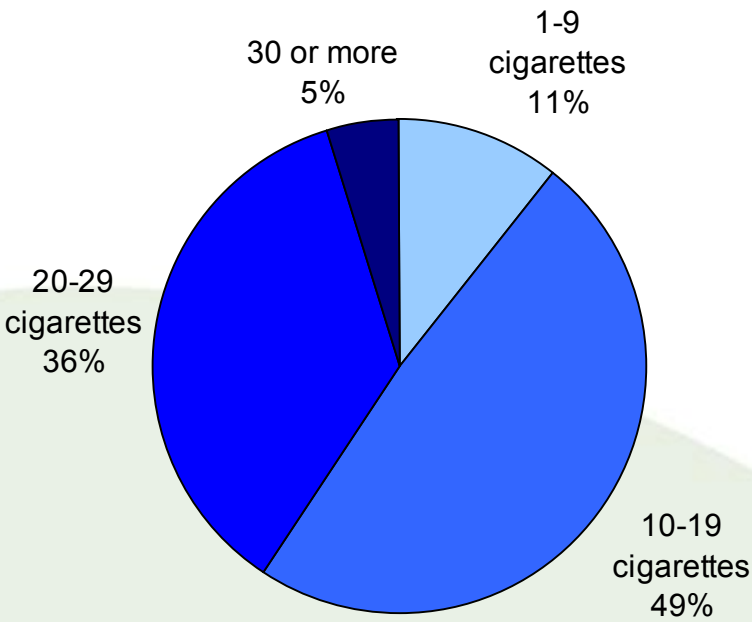
9.5 Number of cigarettes smoked per day

Within the 2004 Gateshead Lifestyle Survey, those people who smoke were asked, on average, how many cigarettes they smoked each day.

Number of cigarettes smoked per day: Male



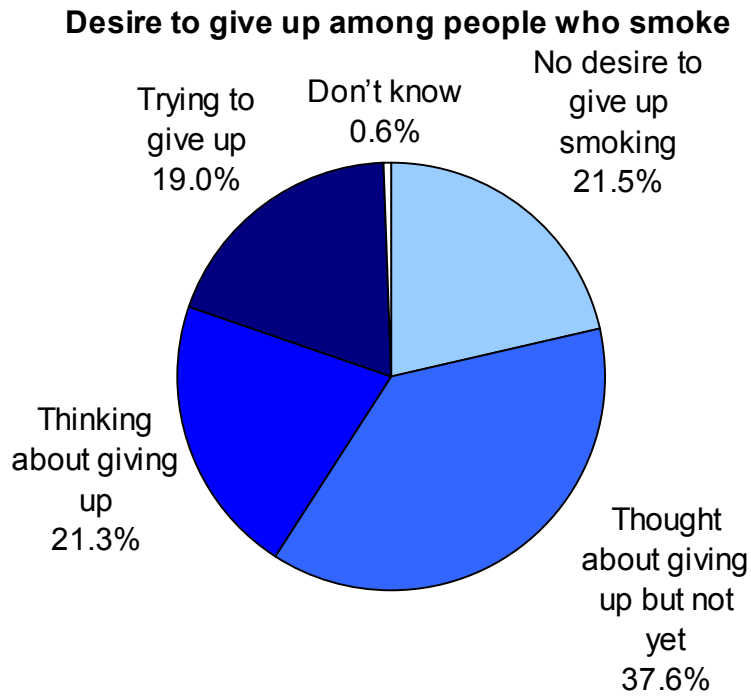
Number of cigarettes smoked per day: Female



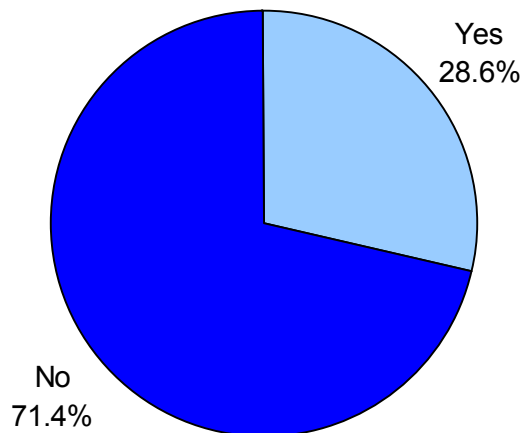
Source: 2004 Gateshead Lifestyle Survey, Gateshead PCT

9.6 Smoking – desire to give up

Within the 2004 Gateshead Lifestyle Survey, those people who smoke were asked if they wanted to give up or were actively trying to quit.



Percentage of people who had been advised to stop smoking by a health professional among people who smoke



9.7 Alcohol – recommended safe limits for daily consumption and definition of heavy drinking

Government guidelines for the safe consumption of alcohol are no more than 3-4 units a day for men, and no more than 2-3 units for women.

These daily limits replaced the old weekly limits of 14 units for women and 21 units for men following publication of a Government report “Sensible Drinking”⁴ in 1995. The new limits recognise the harm caused by heavy drinking on a single occasion. They are expressed as a range because the safe limit will vary depending on individual physiology e.g. height and weight.

One unit of alcohol is equivalent to 10ml of pure alcohol. As a rough guide:

- 1 pint of ordinary lager, bitter or cider, 175ml glass of wine = 2 units
- 1 pint of strong lager = 3 units
- 1 alcopop = 1.5 units
- 1 measure of spirits = 1 unit
- many wines are around 11 or 12 per cent alcohol therefore a small glass = 1.5 units

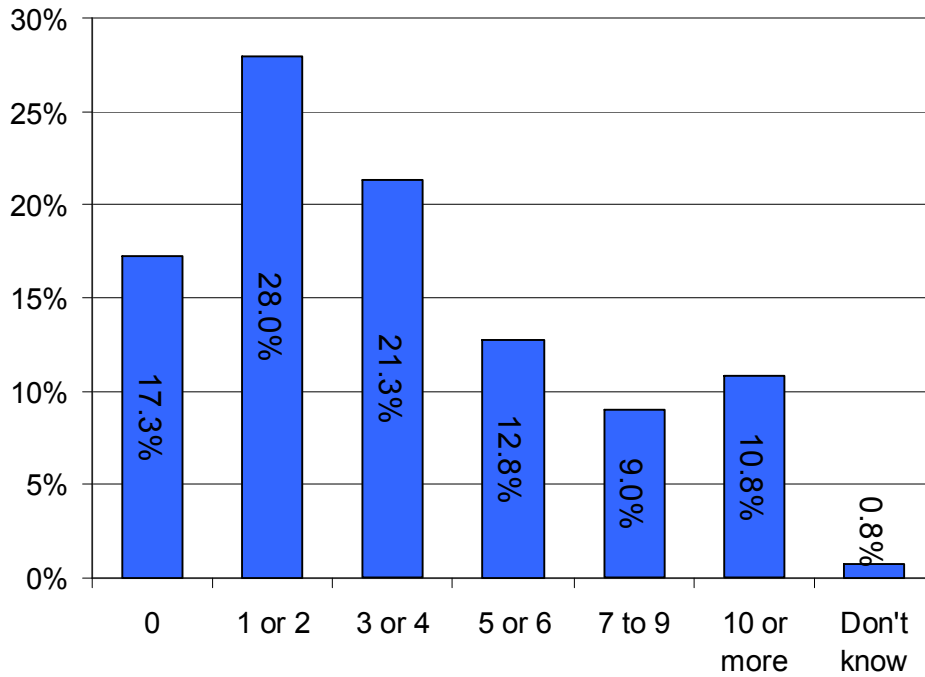
“Heavy drinking” or “binge drinking” is defined by the Office for National Statistics as the consumption of eight or more units of alcohol for men or six or more units for women on a single occasion i.e. double the maximum safe daily limit. Both the General Household Survey and the Health Survey for England report on the proportion of men and women who consumed more than 8 or 6 units respectively on a single occasion at least once in the previous week.

This definition of heavy drinking has largely replaced one based on the old weekly safe limits. These defined heavy drinking as consumption of 10 units for men or 7 units for women.

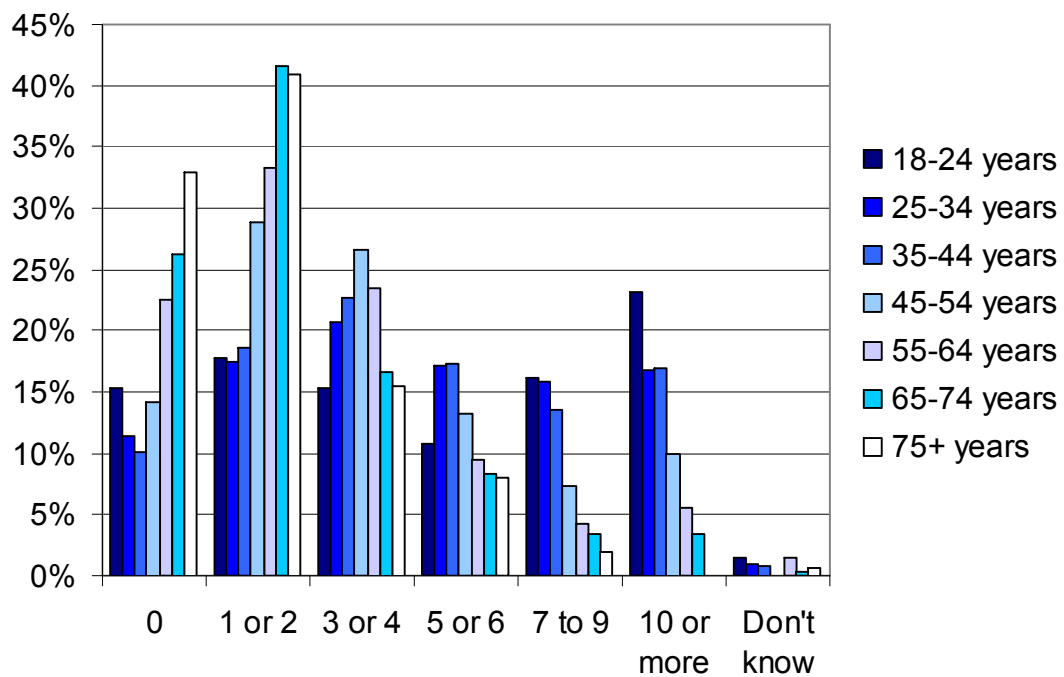
⁴ Department of Health, (1995) Sensible Drinking: the report of an inter-departmental working group. London: Department of Health.

9.8 Alcohol – consumption on an average drinking day in Gateshead

Average consumption of alcohol in units, on a typical drinking day among all people ages 18 years and over



Average consumption of alcohol in units, on a typical drinking day by age band



9.8 Alcohol - consumption on a typical drinking day (cont.)

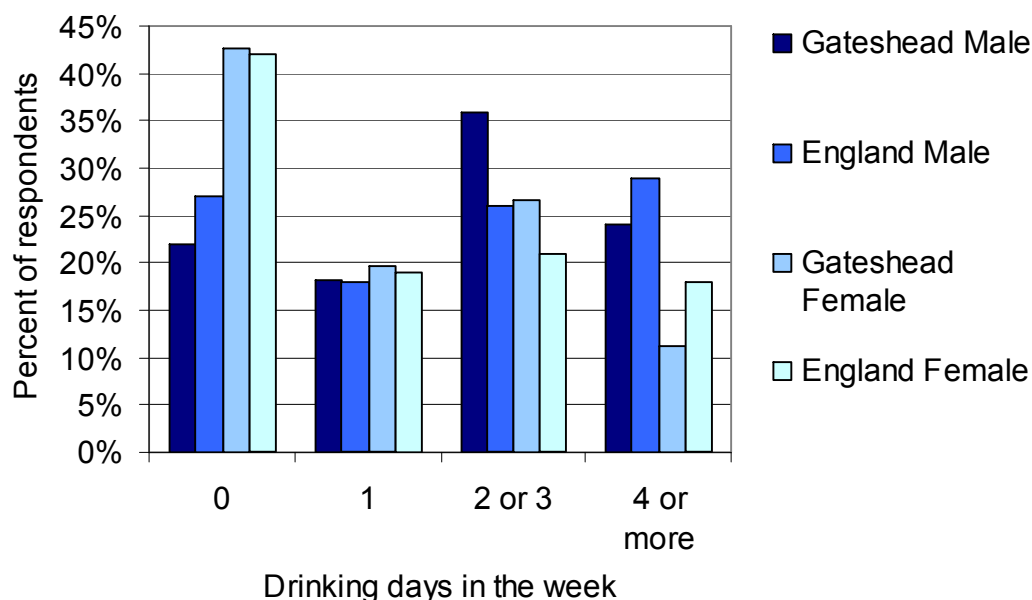
Alcohol consumption on a typical drinking day by age band

Alcohol in units	Age band (years)							
	Total Respondents	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75+ years
0	17.3%	15.4%	11.5%	10.1%	14.1%	22.6%	26.3%	32.9%
1 or 2	28.0%	17.7%	17.4%	18.6%	28.8%	33.2%	41.5%	40.9%
3 or 4	21.3%	15.4%	20.7%	22.6%	26.6%	23.5%	16.6%	15.4%
5 or 6	12.8%	10.8%	17.0%	17.3%	13.3%	9.5%	8.3%	8.1%
7 to 9	9.0%	16.2%	15.7%	13.6%	7.3%	4.3%	3.5%	2.0%
10 or more	10.8%	23.1%	16.7%	17.0%	9.9%	5.5%	3.5%	0.0%
Don't know	0.8%	1.5%	1.0%	0.8%	0.0%	1.5%	0.3%	0.7%

Source: 2004 Gateshead Lifestyle Survey, Gateshead PCT

9.9 Alcohol – frequency of drinking for males and females in Gateshead

Respondents to the 2004 Gateshead Lifestyle Survey were asked “How often do you currently have a drink containing alcohol?”. People included in the 2004 General Household Survey were asked whether they drank alcohol last week and on how many days they drank alcohol. Although not a perfect comparison, the results are shown alongside each other.



England - on how many days did you drink last week?	Gateshead - how often do you drink	Gateshead Male	England Male	Gateshead Female	England Female
0	"Twice a month or less" or "never"	22.0%	27.0%	43%	42%
1	Once a week	18.2%	18.0%	20%	19%
2 or 3	2 or 3 times a week	35.8%	26.0%	27%	21%
4 or more	4 or more times a week	24.0%	29.0%	11%	18%
		100.0%	100.0%	100%	100%

9.10 Alcohol – frequency of heavy drinking for males and females in Gateshead and England

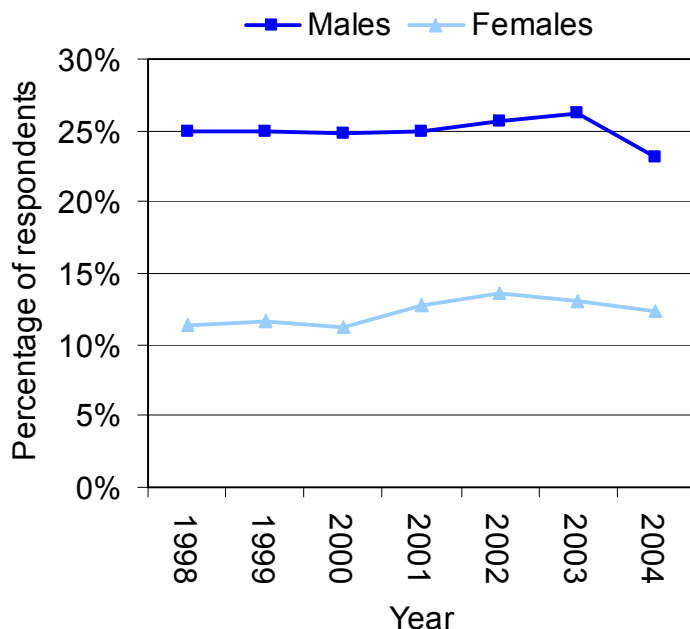
The 2004 Gateshead Lifestyle Survey used the old definitions of heavy drinking, based on consumption of 10 or more units for men and 7 or more units for women on a single occasion.

Frequency of men drinking 10 or more units of alcohol on one occasion	
Daily or almost daily	3.6%
Twice a week	10.8%
Weekly	21.7%
Fortnightly	3.0%
Monthly	12.7%
Less than monthly	13.5%
Never	34.4%
Don't know/refused	0.4%

Frequency of women drinking 7 or more units of alcohol on one occasion	
Daily or almost daily	0.7%
Twice a week	2.7%
Weekly	12.9%
Fortnightly	1.9%
Monthly	12.0%
Less than monthly	19.8%
Never	49.6%
Don't know/refused	0.4%

Source: 2004 Gateshead Lifestyle Survey, Gateshead PCT

Trend data is available on heavy drinking for England as a whole from the Health Survey for England between 1998 and 2004. This measures the proportion of men and women ages 16 and over who drink heavily (8 or more units for men or 6 or more units for women) on a single occasion, weekly or more often.



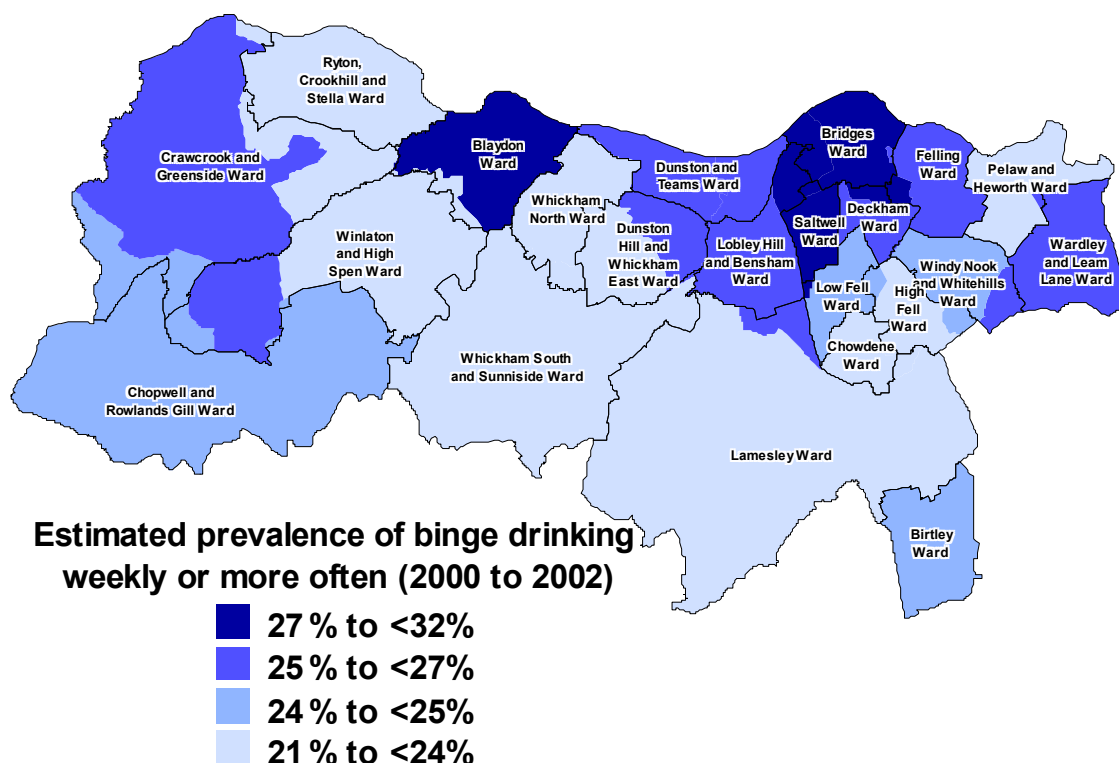
Percentage of people drinking 8 units of alcohol or more for men or 6 units or more for women on the heaviest drinking day last week

Year	Males	Females
1998	24.9%	11.3%
1999	24.9%	11.7%
2000	24.8%	11.2%
2001	25.0%	12.8%
2002	25.7%	13.6%
2003	26.2%	13.1%
2004	23.2%	12.4%

Source: Health Survey for England, Department of Health

9.11 Alcohol - prevalence of binge drinking weekly or more often – synthetic⁵ estimates for Gateshead wards

Binge drinking is defined by the Office for National Statistics as the consumption of eight or more units of alcohol for men or six or more units for women on a single occasion i.e. double the maximum safe daily limit. These estimates are for pre-June 2004 Gateshead electoral wards and are laid over a map of the new electoral ward boundaries.



Estimates of prevalence are average figures for the years 2000–2002. National estimates of the prevalence of heavy drinking have not changed greatly since 2002. In 2006, these figures are therefore still reasonable estimates of current behaviour, and variations in behaviour between wards.

The ward level data for Gateshead and all other Local Authority areas in England are available on the Office for National Statistics' [Neighbourhood Statistics](#) website.

⁵ These synthetic estimates are derived from a mathematical model. The model uses Health Survey for England data for four years and links the likelihood of a person binge drinking with characteristics such as age, marital status, socio-economic group and geographical region of residence. It then estimates the number of binge drinkers in each ward, given the composition of the population in that ward, from which prevalence is derived. Using this model it is possible to generate estimates of prevalence for smaller geographical areas than would otherwise be possible.

9.11 Alcohol - prevalence of binge drinking weekly or more often – synthetic estimates for electoral wards (cont.)

Gateshead pre-June 2004 Ward	2000-02	H/L*
Bede	31.2%	
Bensham	30.4%	
Saltwell	29.0%	
Blaydon	27.8%	
Dunston	26.4%	
Teams	26.1%	
Crawcrook and Greenside	25.8%	
Deckham	25.6%	
Felling	25.4%	
Wrekendyke	25.3%	
Leam	24.8%	
Birtley	24.6%	
Low Fell	24.5%	
Chopwell and Rowlands Gill	24.2%	
High Fell	23.8%	
Chowdene	23.6%	
Whickham South	23.5%	
Lamesley	23.1%	
Pelaw and Heworth	22.7%	
Whickham North	22.4%	
Winlaton	21.9%	
Ryton	21.3%	
Gateshead PCT	25.0%	H
Newcastle PCT	29.2%	H
North Tyneside PCT	25.3%	H
Northumberland Care Trust	23.4%	H
South Tyneside PCT	26.0%	H
Sunderland Teaching PCT	26.7%	H
ENGLAND	18.2%	

*H/L = significantly higher (H) or lower (L) than England at 95% confidence

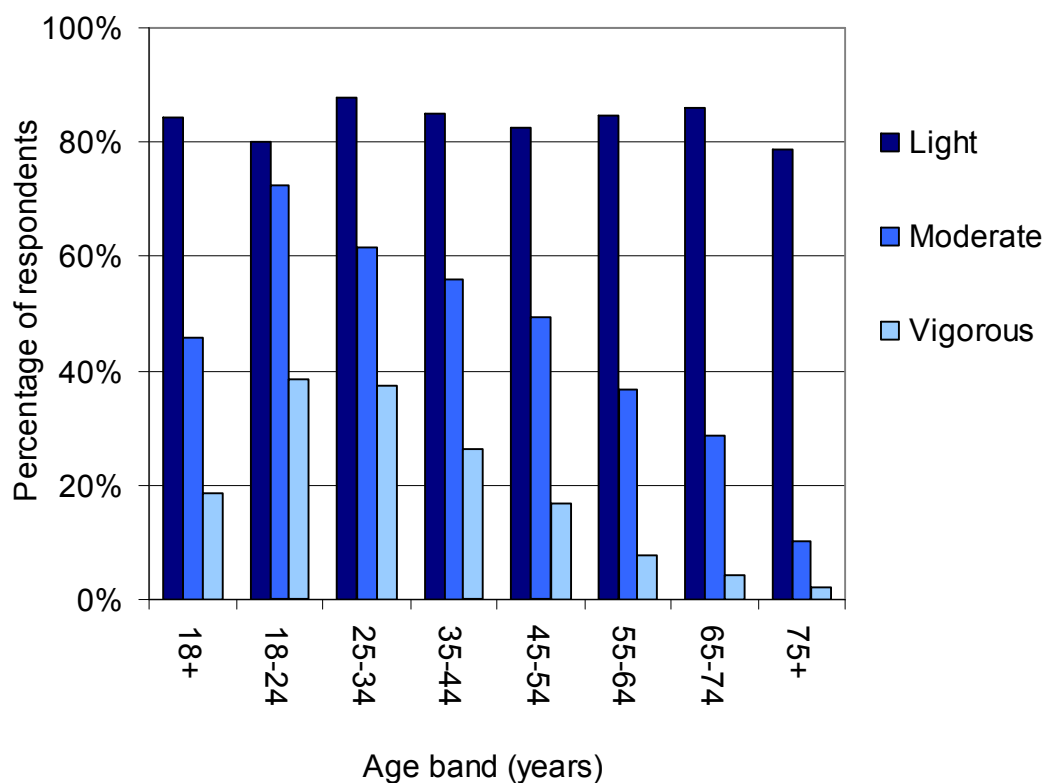
Source: Office for National Statistics at www.neighbourhood.statistics.gov.uk

9.12 Physical exercise

Percentage of respondents who had taken light, moderate or vigorous physical activity in the previous four weeks in Gateshead		
	Male	Female
Light	74.5%	88.8%
Moderate	53.6%	42.1%
Vigorous	32.9%	12.1%

Source: Gateshead Lifestyle Survey 2004

Proportion of people in Gateshead having taken exercise in the previous four weeks by age band



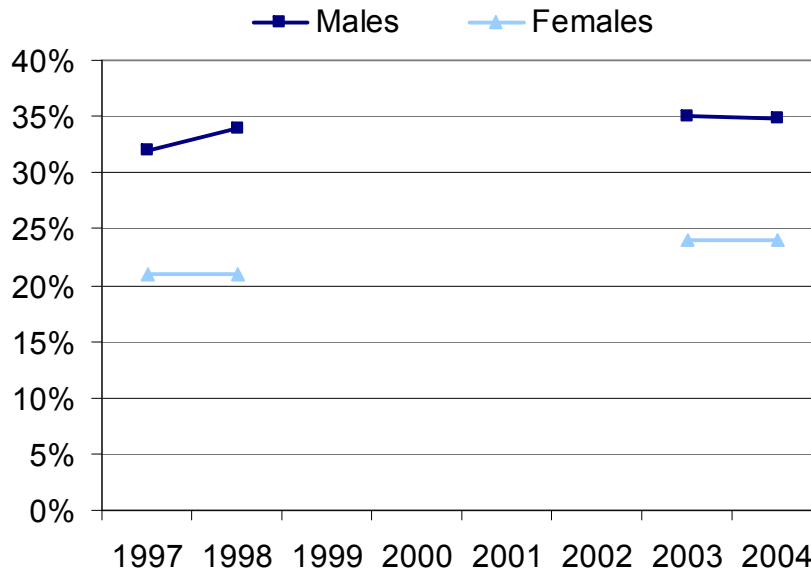
Percentage of respondents who had done light, moderate or vigorous exercise in the past 4 weeks								
	Age band (years)							
	18+	18-24	25-34	35-44	45-54	55-64	65-74	75+
Light	84.3%	80.0%	87.9%	85.1%	82.5%	84.8%	86.2%	78.5%
Moderate	45.7%	72.5%	61.6%	56.1%	49.2%	36.6%	28.7%	10.1%
Vigorous	18.6%	38.3%	37.4%	26.3%	16.7%	7.6%	4.2%	2.0%

Source: Gateshead Lifestyle Survey 2004, Gateshead PCT

9.12 Physical exercise (cont.)

Trend data is available for England as a whole from the Health Survey for England between 1998 and 2004. This measures the proportion of men and women ages 16 and over who achieve the government's physical activity target.

Proportion of people ages 16 and over across England having achieved the government's activity target



Proportion of people ages 16 and over achieving the government's physical activity target*		
Year	Males	Females
1997	32.0%	21.0%
1998	34.0%	21.0%
1999	-	-
2000	-	-
2001	-	-
2002	-	-
2003	35.0%	24.0%
2004	34.8%	23.9%

* A minimum of five days a week of 30 minutes or more moderate-intensity activity

Source: Health Survey for England, Department of Health

Useful references:

Department of Health, 2004, "At least five a week: Evidence on the impact of physical activity and its relationship to health", Department of Health, London

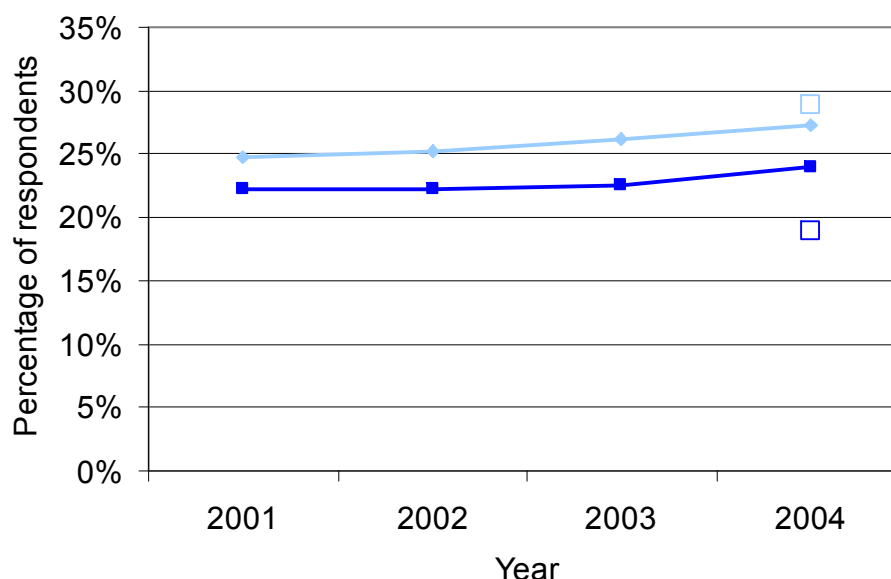
Department of Health, 2002, "Game Plan: a strategy for delivering government's sport and physical activity objectives", Department of Health, London

9.13 Diet – consumption of fruit and vegetables each day

Fruit and vegetables are a good source of vitamins, minerals and fibre. They also help reduce the risk of heart disease, some cancers and stroke. The Department of Health recommends consumption of at least five portions of fruit and vegetables each day.

Proportion of adults consuming five or more portions of fruit and vegetables each day

□ Male Gateshead ■ Male England
□ Female Gateshead ◆ Female England



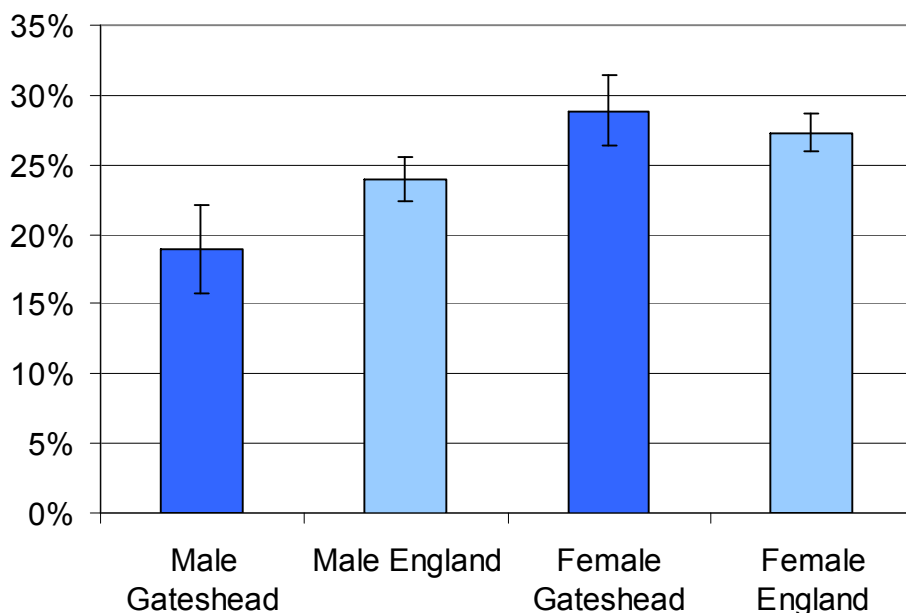
Percentage of adults* consuming five or more portions of fruit and vegetables each day				
Year	Male Gateshead	Male England	Female Gateshead	Female England
2001		22.2%		24.7%
2002		22.3%		25.3%
2003		22.6%		26.1%
2004	18.9%	23.9%	28.9%	27.3%

* Gateshead refers to persons ages 18 years and over, England data refers to persons 16 years and over

Sources: Gateshead, Gateshead Lifestyle Survey, Gateshead PCT; England, Health Survey for England, Department of Health

9.13 Diet – proportion of the population eating five or more portions of fruit and vegetables each day (cont.)

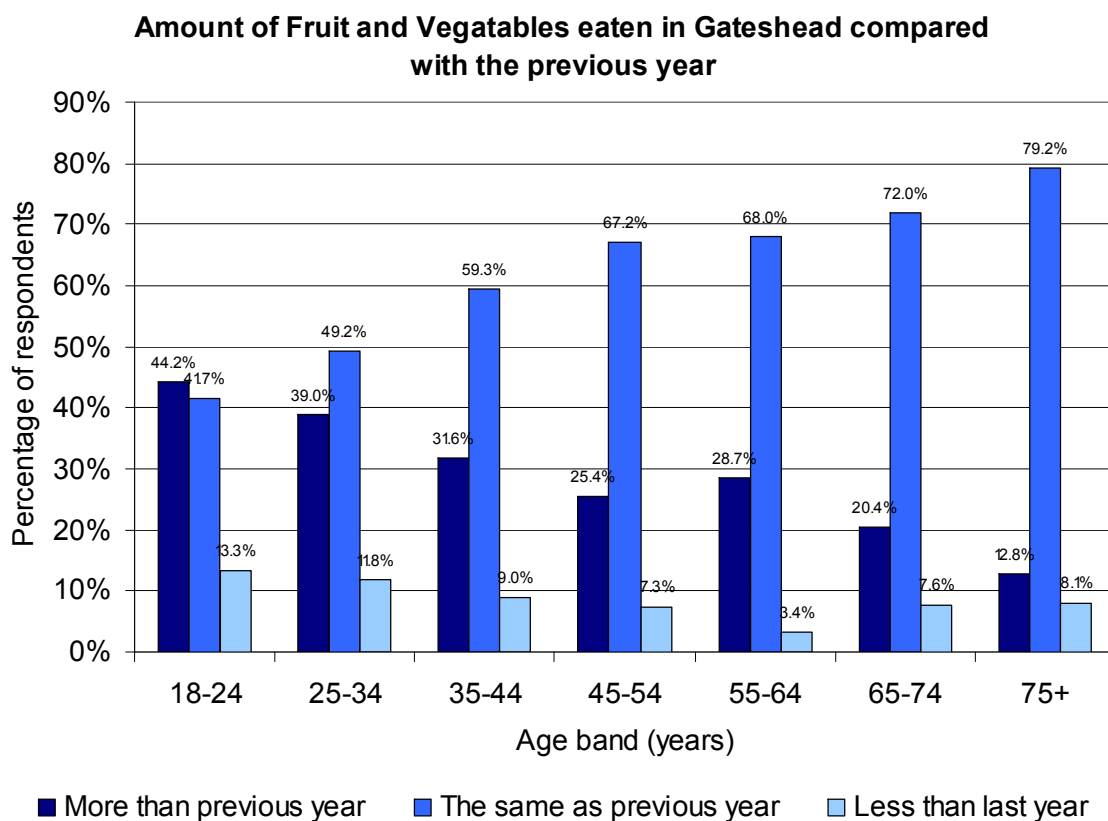
Proportion of the adult population consuming five portions of fruit and vegetables each day in 2004 with 95% confidence limits



Daily consumption of fruit and vegetables in Gateshead by age band and gender										
	Age								Gender	
	18+	18-24	25-34	35-44	45-54	55-64	65-74	75+	Male	Female
Base	1921	120	305	376	354	328	289	149	601	1320
0 portions	2.4%	5.0%	3.6%	4.8%	1.4%	0.6%	1.4%	0.7%	3.7%	1.9%
1-2 portions	32.5%	32.5%	36.4%	31.1%	33.3%	27.4%	30.4%	41.6%	41.3%	28.6%
3-4 portions	39.3%	44.2%	39.7%	39.4%	39.3%	35.7%	41.2%	38.3%	36.1%	40.7%
5-6 portions	21.7%	13.3%	18.0%	22.1%	20.3%	30.2%	21.5%	19.5%	16.1%	24.2%
7-9 portions	3.4%	5.0%	2.0%	2.1%	4.2%	5.2%	4.5%	0.0%	2.3%	3.9%
10 or more portions	0.7%	0.0%	0.3%	0.5%	1.4%	0.9%	0.7%	0.0%	0.5%	0.8%

Source: 2004 Gateshead Lifestyle Survey, Gateshead PCT

9.13 Diet – proportion of the population eating five or more portions of fruit and vegetables each day (cont.)

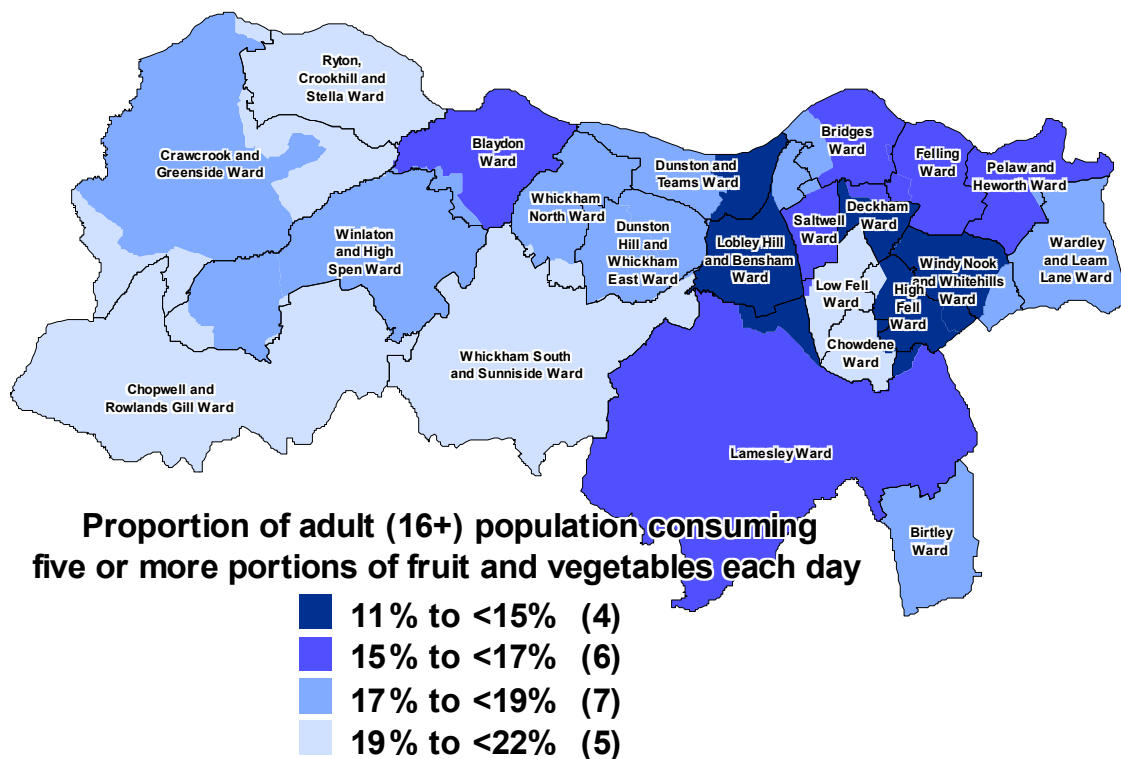


Useful references:

NHS Five a day website at www.5aday.nhs.uk

9.14 Diet – proportion of the adult (16+) population eating five or more portions of fruit and vegetables each day – synthetic⁶ estimates for Gateshead wards

These estimates are for pre-June 2004 Gateshead electoral wards and are laid over a map of the new electoral ward boundaries.



Estimates of prevalence are average figures for the years 2000-2002. National estimates of the prevalence of consumption of five a day have not changed greatly since 2002. In 2006, these figures are therefore still reasonable estimates of current behaviour, and variations in behaviour between wards.

The ward level data for Gateshead and all other Local Authority areas in England is available on the Office for National Statistics' [Neighbourhood Statistics](#) website.

⁶ These synthetic estimates are derived from a mathematical model. The model uses Health Survey for England data for four years and links the likelihood of a person eating five or more portions of fruit and vegetables each day with characteristics such as age, marital status, socio-economic group and geographical region of residence. It then estimates the number of people eating five a day in each ward, given the composition of the population in that ward, from which prevalence is derived. Using this model it is possible to generate estimates of prevalence for smaller geographical areas than would otherwise be possible.

9.14 Diet - proportion of the adult (16+) population eating five or more portions of fruit and vegetables each day – synthetic estimates for Gateshead electoral wards (cont.)

Gateshead pre-June 2004 Ward	2000-02	H/L*
High Fell	11.1%	L
Leam	13.0%	L
Teams	13.1%	
Deckham	13.2%	
Felling	15.7%	
Saltwell	16.0%	
Blaydon	16.2%	
Bede	16.6%	
Pelaw and Heworth	16.6%	
Lamesley	16.9%	
Dunston	17.3%	
Bensham	17.4%	
Wrekendyke	17.4%	
Winlaton	17.5%	
Crawcrook and Greenside	18.0%	
Whickham North	18.0%	
Birtley	18.3%	
Chowdene	19.4%	
Ryton	19.4%	
Chopwell and Rowlands Gill	20.0%	
Whickham South	20.9%	
Low Fell	21.5%	
Gateshead PCT	17.1%	L
Newcastle PCT	17.4%	L
North Tyneside PCT	17.7%	L
Northumberland Care Trust	20.3%	L
South Tyneside PCT	16.3%	L
Sunderland Teaching PCT	16.5%	L
ENGLAND	23.7%	

*H/L = significantly higher (H) or lower (L) than England at 95% confidence

Source: Office for National Statistics at www.neighbourhood.statistics.gov.uk

9.15 Obesity

Body mass index is calculated as weight in kilogrammes divided by height in metres squared (kg/m^2).

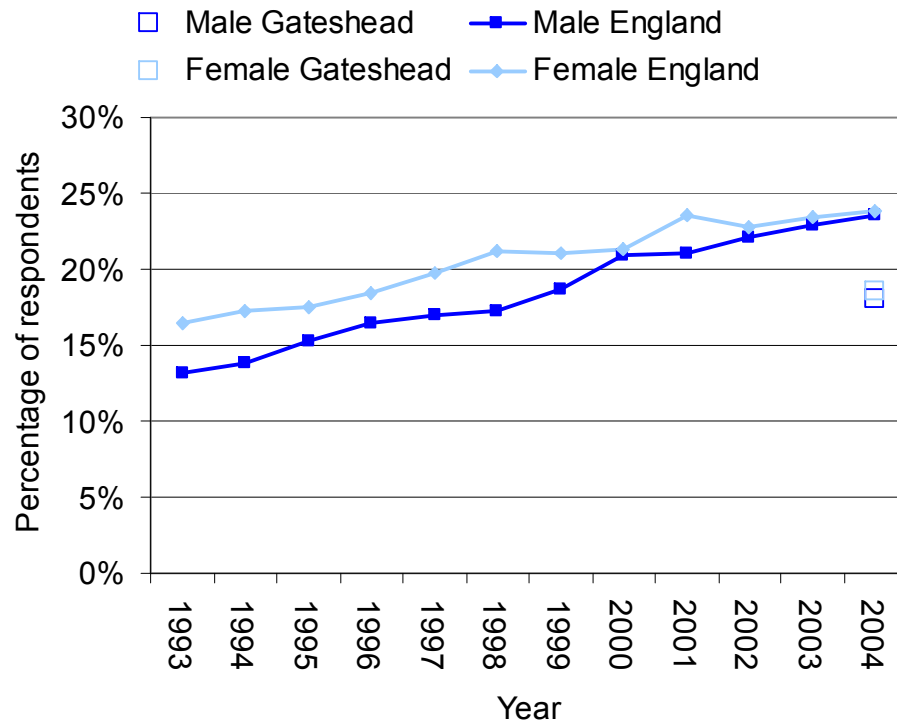
BMI Groups for Adults (ages 16 and over)	
BMI	Description
18.5 or less	Underweight
18.5 to <25	Ideal
25 to <30	Overweight
30 to <40	Obese
40 and over	Very Obese

Source: Department of Health

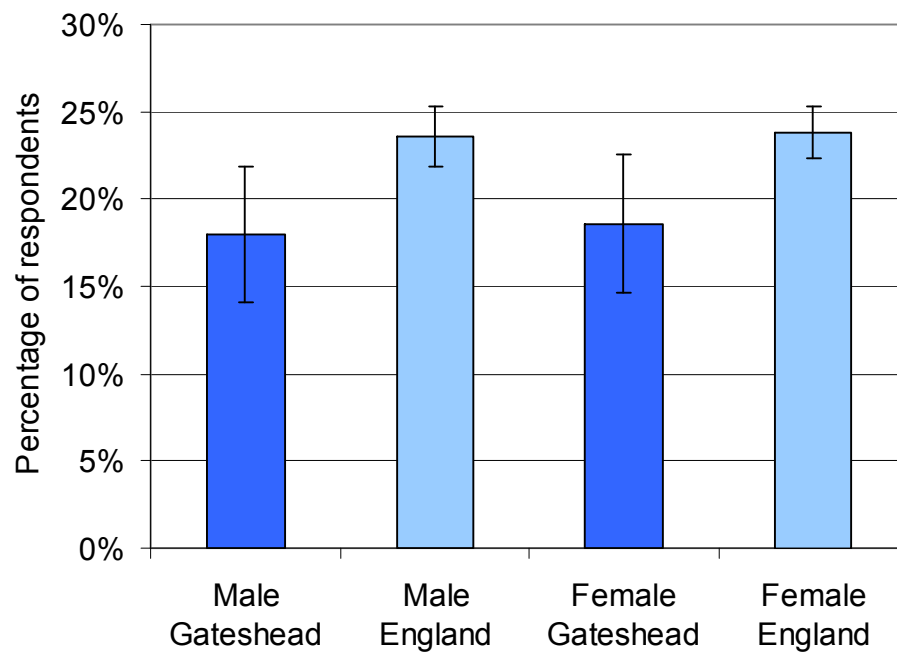
Charts of the following pages show national trends in the prevalence of obesity and “overweight or obese” alongside local data for Gateshead.

9.15 Obesity (cont.)

Proportion of adults who are obese (body mass index 30 or above)

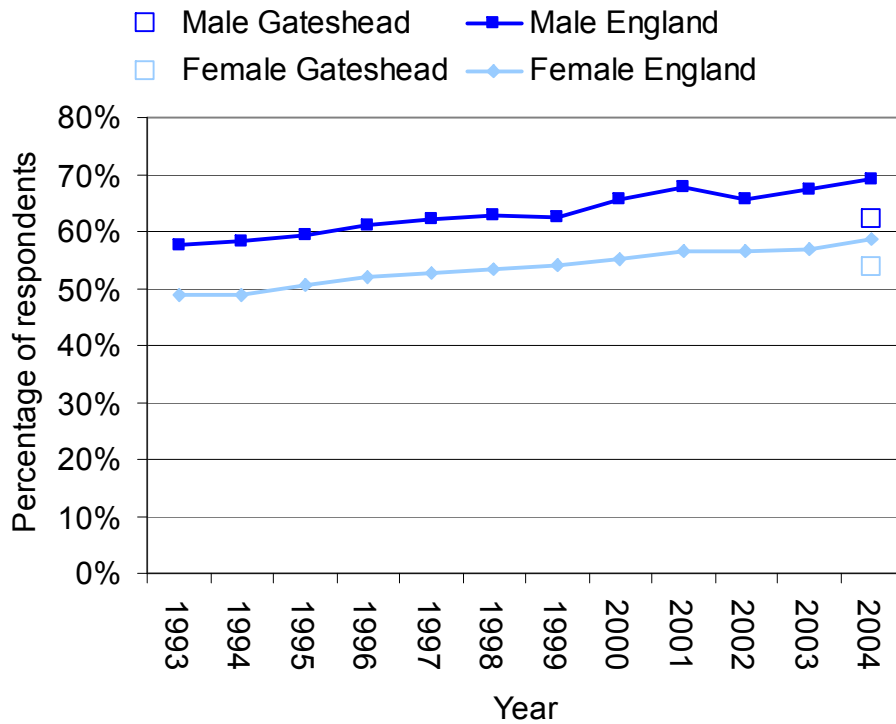


Proportion of the adult population who are obese (body mass index 30 or above) in 2004 with 95% confidence limits

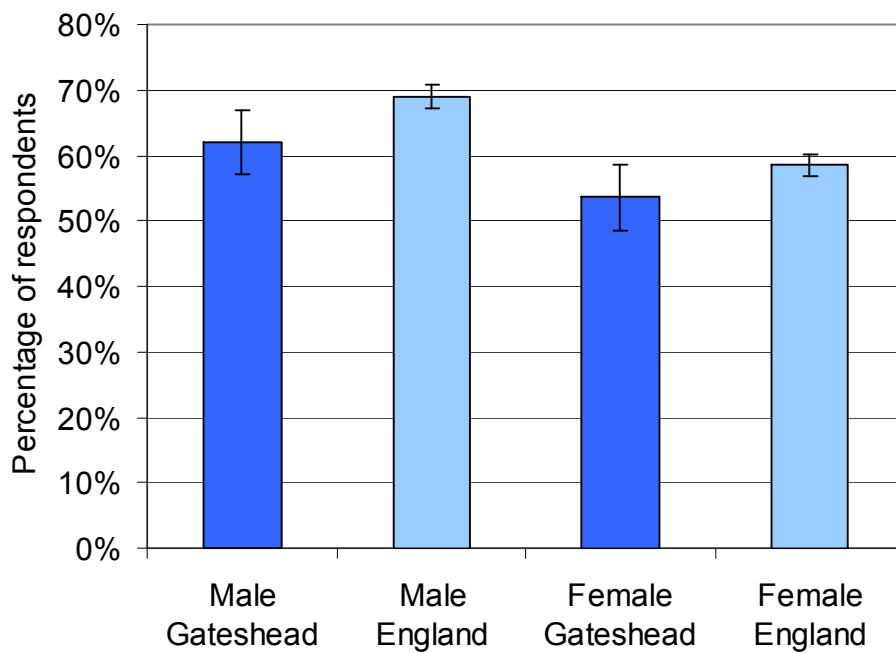


9.15 Obesity (cont.)

Proportion of adults who are overweight or obese (body mass index 25 or above)

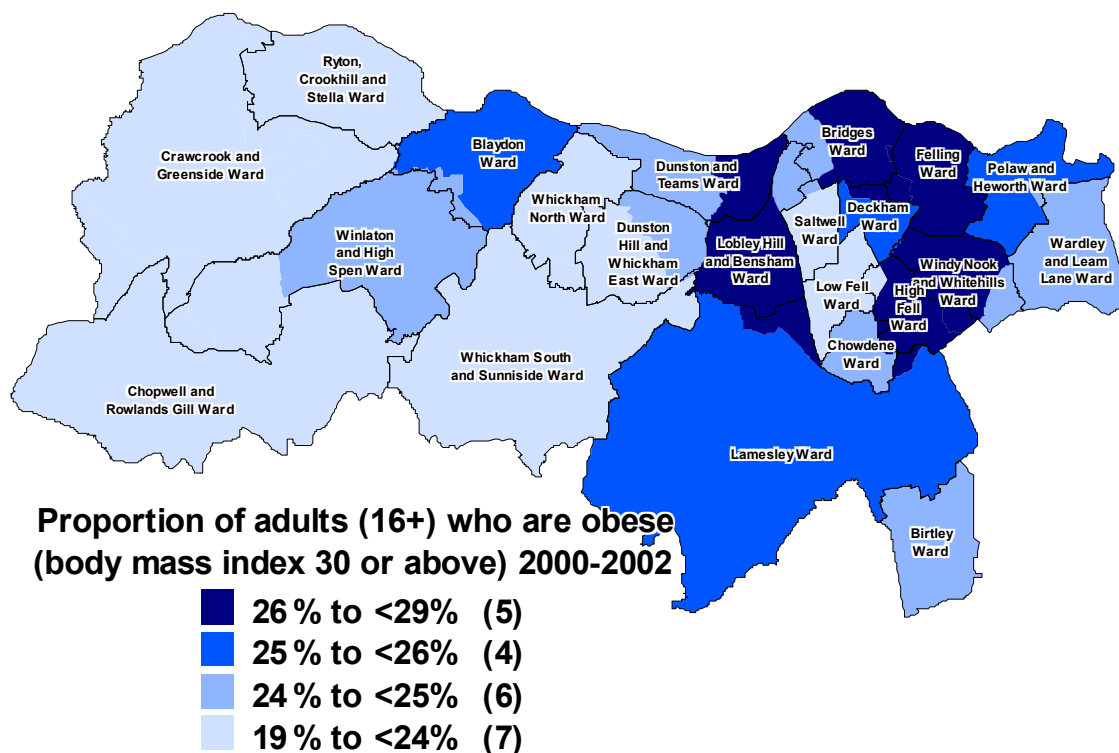


Proportion of the adult population who are overweight or obese (body mass index 25 or above) in 2004 with 95% confidence limits



9.16 Obesity – proportion of the adult population who are obese – synthetic⁷ estimates for Gateshead wards

These estimates are for pre-June 2004 Gateshead electoral wards and are laid over a map of the new electoral ward boundaries.



Estimates of prevalence are average figures for the years 2000-2002. National estimates of the prevalence of obesity have risen since 2002, but a local survey⁸ suggested that prevalence in Gateshead is lower than the national estimate. Even with these qualifications, the figures are a useful pointer towards variations in prevalence of obesity between wards.

The ward level data for Gateshead and all other Local Authority areas in England is available on the Office for National Statistics' [Neighbourhood Statistics](#) website.

⁷ These synthetic estimates are derived from a mathematical model. The model uses Health Survey for England data for four years and links the likelihood of a person being obese with characteristics such as age, marital status, socio-economic group and geographical region of residence. It then estimates the number of obese people in each ward, given the composition of the population in that ward, from which prevalence is derived. Using this model it is possible to generate estimates of prevalence for smaller geographical areas than would otherwise be possible.

⁸ Gateshead PCT, 2004, "bmi: A Local Baseline Study of Body Mass Index", Gateshead PCT, Gateshead

9.16 Obesity - proportion of the adult (16+) population who are obese – synthetic estimates for Gateshead electoral wards (cont.)

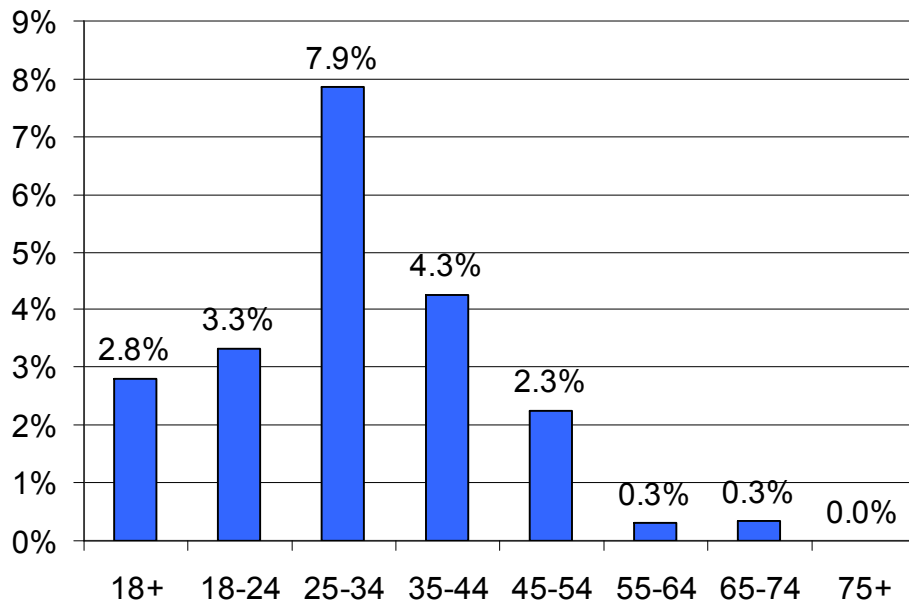
Gateshead pre-June 2004 Ward	2000-02	H/L*
High Fell	28.3%	
Felling	28.0%	
Leam	26.8%	
Bede	26.7%	
Teams	26.6%	
Lamesley	25.4%	
Blaydon	25.2%	
Pelaw and Heworth	25.1%	
Deckham	25.0%	
Dunston	24.8%	
Wrekendyke	24.6%	
Bensham	24.5%	
Birtley	24.5%	
Chowdene	24.3%	
Winlaton	24.0%	
Chopwell and Rowlands Gill	23.4%	
Saltwell	22.6%	
Crawcrook and Greenside	22.1%	
Whickham North	21.9%	
Ryton	21.6%	
Whickham South	20.1%	
Low Fell	19.4%	
Gateshead PCT	24.1%	
Newcastle PCT	22.0%	
North Tyneside PCT	23.0%	
Northumberland Care Trust	23.9%	H
South Tyneside PCT	24.3%	
Sunderland Teaching PCT	24.3%	
ENGLAND	22.1%	

*H/L = significantly higher (H) or lower (L) than England at 95% confidence

Source: Office for National Statistics at www.neighbourhood.statistics.gov.uk

9.17 Sexual health – percentage treated for a sexually transmitted infection in Gateshead by age band

Percentage of people in Gateshead having been treated for a sexually transmitted infection by age band



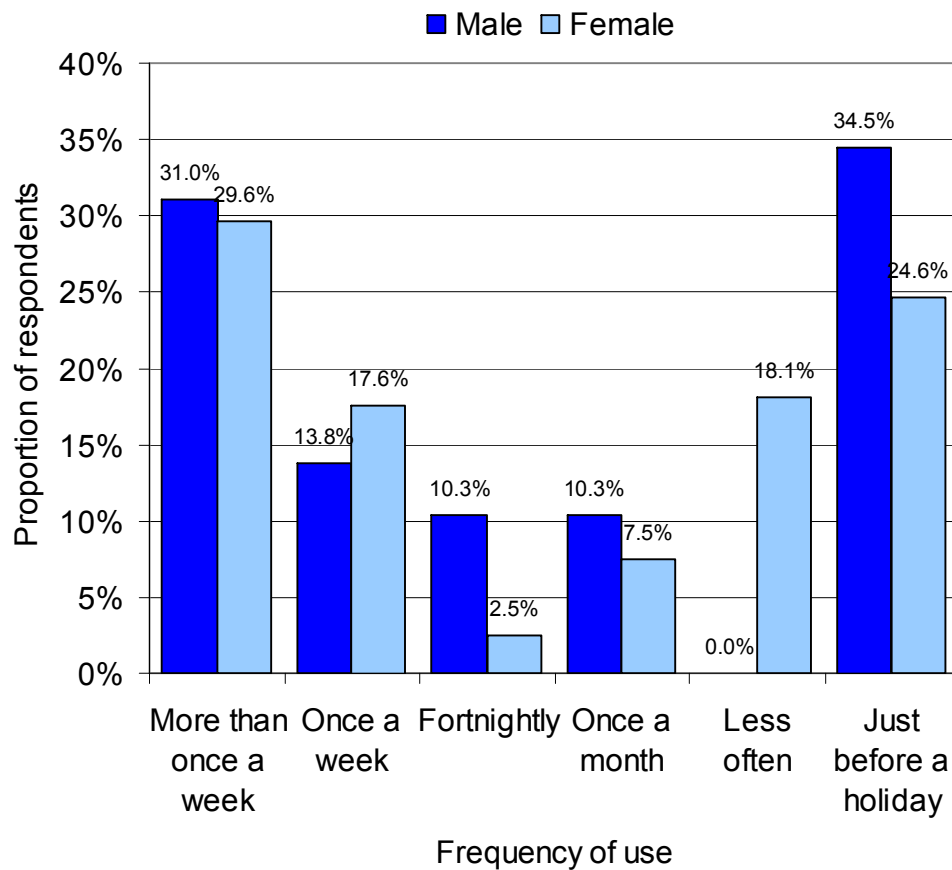
Source: Gateshead Lifestyle Survey 2004, Gateshead PCT

9.18 Sunbeds

Proportion of people in Gateshead who use sunbeds by age band and gender										
	Age								Gender	
	18+	18-24	25-34	35-44	45-54	55-64	65-74	75+	Male	Female
Base	1921	120	305	376	354	328	289	149	601	1320
Uses Sunbeds	11.9%	25.8%	23.3%	17.3%	12.1%	4.3%	1.4%	0.0%	4.8%	15.1%
Doesn't use Sunbeds	88.1%	74.2%	76.7%	82.7%	87.9%	95.7%	98.6%	100.0%	95.2%	84.9%

Source of data: Gateshead Lifestyle Survey 2004, Gateshead PCT

Frequency of use among respondents who use sunbeds



Source of data: 2004 Gateshead Lifestyle Survey

9.19 Self-reported health

Self-classification of health in Gateshead in 2004 by age band								
	Age							
	18+	18-24	25-34	35-44	45-54	55-64	65-74	75+
Excellent	11.1%	10.0%	14.1%	12.8%	11.9%	10.7%	8.3%	6.0%
Very Good	30.8%	32.5%	39.7%	35.9%	29.1%	26.5%	27.3%	18.1%
Good	34.9%	43.3%	35.1%	32.2%	33.9%	32.9%	35.3%	40.9%
Fair	16.7%	10.8%	9.5%	14.6%	17.5%	21.0%	20.4%	22.8%
Poor	6.5%	3.3%	1.6%	4.5%	7.6%	8.8%	8.3%	12.1%
Don't know	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	0.0%

Source: Gateshead Lifestyle Survey 2004, Gateshead PCT

Self-classification of health in Gateshead in 2004 by gender, social grade and employment status							
	Gender		Social Grade*			Employment Status	
	Male	Female	AB	C1C2	DE	Employed	Not employed
Excellent	10.5%	11.4%	18.3%	12.1%	7.8%	11.7%	7.5%
Very Good	30.6%	30.8%	35.8%	35.6%	23.4%	33.0%	18.6%
Good	36.3%	34.3%	33.5%	35.9%	34.2%	36.3%	27.1%
Fair	16.8%	16.7%	9.6%	13.0%	23.4%	14.7%	27.8%
Poor	5.8%	6.7%	2.8%	3.4%	11.3%	4.2%	19.0%
Don't know	0.0%	0.1%	0.0%	0.1%	0.0%	0.1%	0.0%

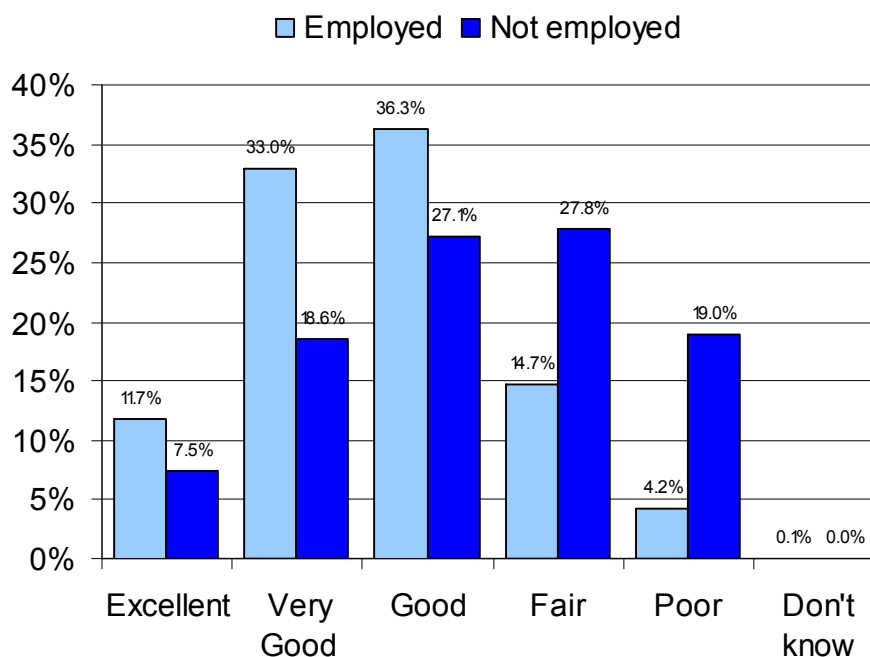
* AB = higher and intermediate management/administrative/professional

C1C2 = supervisory, junior management/administrative/professional and skilled manual workers

DE = semi-skilled, unskilled manual workers, unemployed

Source: Gateshead Lifestyle Survey 2004, Gateshead PCT

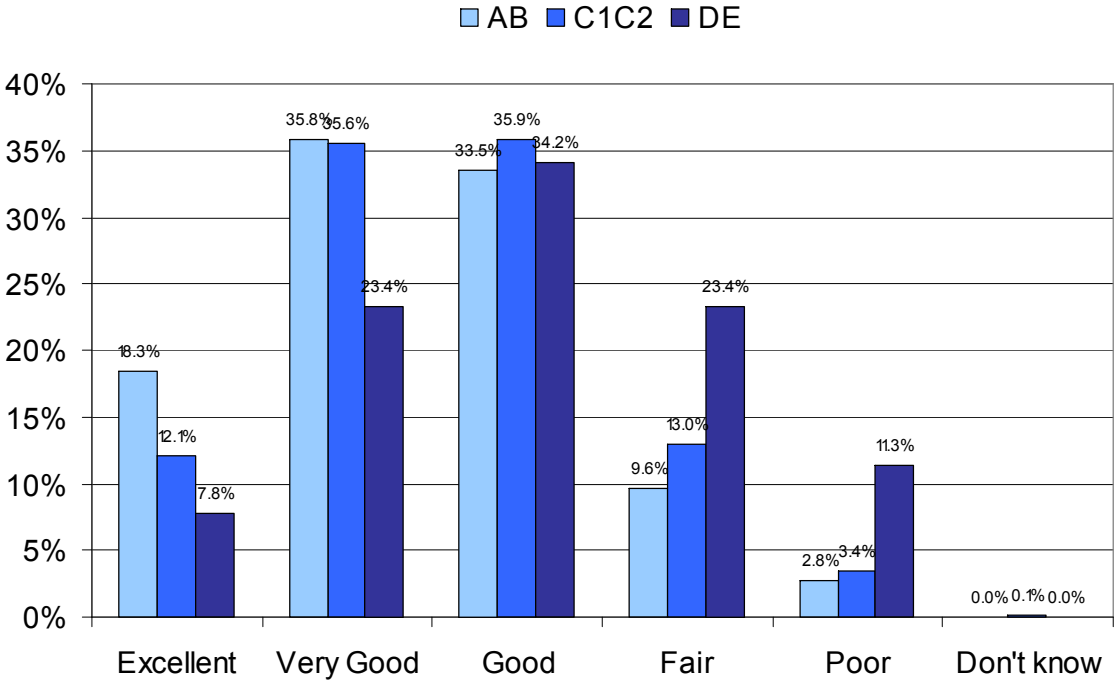
Self-Classification of Health by Employment Status



Source: Gateshead Lifestyle Survey 2004, Gateshead PCT

9.19 Self-reported health (cont.)

Self-Classification of Health by Socio-economic Group



Source: Gateshead Lifestyle Survey 2004, Gateshead PCT

